Monroe			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings		D0274		0	00	\$0	\$0	\$0	0
Prophylaxis Adult		D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310	1-11-1-11	0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351		0	0	\$0	\$0	\$0	0
Assessment		H0002	Encounter	113	132	\$3,467	\$31	\$26	1
Crisis Residential Services		H0018	Days	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025	Face to Face Contact	1	1	\$88	\$88	\$88	1
Assessment		H0031	Encounter	379	484	\$55,441	\$146	\$115	I
Treatment Planning		H0032	Encounter	193	227	\$25,641	\$133	\$113	I
Health Services		H0034	15 Minutes	20	284	\$15,895	\$795	\$56	14
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	30	0	\$235,165	\$7,839	\$0	0
Peer Directed and Operated Support Services		NA		0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	58	8,319	\$562,685	\$9,701	\$68	143
Community Living Supports in Independent living/own home		H0043	Per diem	7	868	\$10,084	\$1,441	\$12	124
Respite		H0045	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000	Encounter	3	3	\$414	\$138	\$138	1
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	217	1,043	\$414,560	\$1,910	\$397	5
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	19	19,552	\$64,880	\$3,415	\$3	1,029
Community Living Supports (15 Minutes)		H2015	15 Minutes	133	148,690	\$455,186	\$3,422	\$3	1,118
Community Living Supports (Daily)		H2016	Per Diem	3	445	\$13,742	\$4,581	\$31	148
Community Living Supports (Daily)		H2016	Per Diem	3	425	\$26,643	\$8,881	\$63	142
Community Living Supports (Daily)		H2016	Per Diem	10	1,429	\$190,271	\$19,027	\$133	143
Behavior Services		H2019	15 Minutes	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023	15 minutes	154	11,341	\$73,978	\$480	\$7	74
Mental Health Therapy		H2027	15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	71	64,509	\$240,912	\$3,393	\$4	909
Medication Review		M0064	Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209	Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215	Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110	15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111	Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140	Days	3	199	\$8,832	\$2,944	\$44	66
Foster Care		S5145	Days	0	0	\$0	\$0	\$0	0
Respite		S5150	15 Minutes	0	0	\$0	\$0	\$0	0

Monroe			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0_
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	. 9	54	\$1,079	\$120	\$20	6
Health Services		S9446	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470	Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	0	0	\$0	\$0	\$0	0
Reidential Room and Board		S9976	Days	0	0	\$0	\$0	\$0	0
Assessment		T1001	Encounter	31	104	\$10,071	\$325	\$97	3
Health Services		T1002	Up to 15 min	29	1,592	\$295,794	\$10,200	\$186	55
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	4	429	\$3,535	\$884	\$8	107
Supports Coordination/Wrap Facilitation		T1016	15 minutes	3	14	\$1,222	\$407	\$87	5
Targeted Case Management		T1017	15 minutes	620	20,045	\$1,226,875	\$1,979	\$61	32
Nursing Home Mental Health Monitoring		T1017	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	Days	6	1,177	\$37,299	\$6,217	\$32	196
Personal Care in Licensed Specialized Residential Setting		T1020	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	Days	6	507	\$72,232	\$12,039	\$142	85
Assessments		T1023	Encounter	436	711	\$109,116	\$250	\$153	2
Enhanced Medical Supplies or Pharmacy	•	T1999	Items	0	0	\$0	\$0	\$0	0
Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004		0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	1	1	\$874	\$874	\$874	1
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				0	0	\$0	\$0	\$0	0
Other				0	0	\$0	\$0	\$0	0
Total Population and Cost				1,425		\$6,362,662			

Process   Proc	Montcalm			Unit						
Part	Service Category	Revenue Code	HCPCS Code		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Part	State Psychiatric Hospital - Inpatient PT22			Days	8	486	\$230,682	\$28,835	\$475	61
Page	State Mental Retardation Facility - Inpatient (ICF/MR) PT65			Days	0	0	\$0	\$0	\$0	0
Page 1985   Page	Local Psychiatric Hospital/IMD PT68			Days	3	20	\$11,610	\$3,870	\$581	7
Species Hispark Acellay Services - Leave of Alexance   1988   1908   1	Local Psychiatric Hospital - Acute Community PT73			Days	68	468	\$295,754	\$4,349	\$632	7
Pageinet Heaplak Acadleys Serviers - Paramany   0,530 - 254, 073   7   7   7   7   7   7   7   7   7	Inpatient Hospital Ancillary Services - Room and Board	0144		Days	0	0	\$0	\$0	\$0	0
Page	Inpatient Hospital Ancillary Services - Leave of Absence	0183		Days	0	0	\$0	\$0	\$0	0
Septemble Marchilly Services - Laboratory   910,00000000000000000000000000000000000	Inpatient Hospital Ancillary Services - Pharmacy				0	0	\$0	\$0	\$0	0
Page	Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		# of items	0	0	\$0	\$0	\$0	0
Part	Inpatient Hospital Ancillary Services - Laboratory			# of tests	0	0	\$0	\$0	\$0	0
Inguiser Hospital Acadillay Services - Repistrocy Services	Inpatient Hospital Ancillary Services - Radiology	0320		# of tests	0	0	\$0	\$0	\$0	0
Institute Rispoil Ancillary Services -Operational Principal Congolishinal Pr	ECT Anesthesia	0370			0	0	\$0	\$0	\$0	0
Papelant Hospital Ancellury Services - Occupational Therapy	Inpatient Hospital Ancillary Services - Respiratory Services	0410		# of treatments	0	0	\$0	\$0	\$0	0
Paparient Hospital Ascellary Services - Sprechels - Spreches - S	Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		# of treatments	0	0	\$0	\$0	\$0	0
	Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434		# of treatments	0	0	\$0	\$0	\$0	0
Equation Hospital Ancillary Services - Authonizary Function   0400   8 of feets   0   0   0   0   0   0   0   0   0	Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444		# of treatments	0	0	\$0	\$0	\$0	0
Ingestient Hospiel Ancellary Services - Audiology (MRT)	Inpatient Hospital Ancillary Services - Emergency Room	0450		# of visits	0	0	\$0	\$0	\$0	0
Inpatien Hospital Ancillary Services - Magnetic Resonance Technology (MRT)   661-6011   8 of tests   0   0   0   50   50   50   0   0   0	Inpatient Hospital Ancillary Services - Pulmonary Function	0460		# of tests	.0	0	\$0	\$0	\$0	0
	Inpatient Hospital Ancillary Services - Audiology	0470-0472		# of tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611		# of tests	0	0	\$0	\$0	\$0	0
Inpatien Hespital Ancillary Services - EKGGCG	Inpatient Hospital Ancillary Services - Pharmacy	0636		# of units	0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - EEG	ECT Recovery Room	0710			0	0	\$0	\$0	\$0	0
Extended Observation Beds	Inpatient Hospital Ancillary Services -EKG/ECG			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	Inpatient Hospital Ancillary Services - EEG	0740		# of tests	0	0	\$0	\$0	\$0	0
Papatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services   Opin (10)14-0919   Days   Days   O   O   SO   SO   SO   O   O   O   O	Extended Observation Beds	0762		Hour	0	0	\$0	\$0	\$0	0
Comparient Partial Hospitalization   0911, 0914-0919   10	Additional Codes-ECT Facility Charge	0901		Encounter	0	0	\$0	\$0		0
Dupatient Partial Hospital Exertice Partial Hospital Ancillary Services - Other Diagnosis Services   0925	Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services   0940-0942	Outpatient Partial Hospitalization	0912		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services   0940-0942	Outpatient Partial Hospitalization	0913		Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia         00104         Minutes         0         0         \$0	Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925		# of tests	0	0	\$0	\$0	\$0	0
Medication Administration         90782         Encounter         0         0         \$0		0940-0942		# of visits	0	0	\$0	\$0	\$0	0
Medication Administration   90788   Encounter   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Additional Codes-ECT Anesthesia		00104	Minutes	0	0	\$0	\$0	\$0	0
Sasesment-Psychiatric Assessment   Sychiatric Assess	Medication Administration		90782	Encounter	0	0	\$0	\$0	\$0	0
Seessment	, , , , , , , , , , , , , , , , , , , ,			Encounter	0		\$0	\$0		0
Pherapy-Individual Therapy   90804   Encounter 20-30 Min   72   103   \$10,168   \$141   \$99   10   \$1	Assessment-Psychiatric Assessment		90801	Encounter	137	142	\$39,986	\$292	\$282	1
Pherapy-Individual Therapy   9885   Encounter 20-30 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessment-Psychiatric Assessment			Encounter	0	0	\$0	\$0		0
Pherapy-Individual Therapy	**				72	103	\$10,168	\$141		1
Pherapy-Individual Therapy					0	0	\$0	\$0	\$0	
Therapy-Individual Therapy         90808         Encounter 75-80 Min         1         1         \$236				Encounter 45-50 Min	304	1,513	\$186,090		\$123	5
Therapy-Individual Therapy         90809         Encounter 75-80 Min         0         0         \$			90807	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy         9810         Encounter 20-30 Min         0         0         \$0					1	1	\$236	\$236	\$236	1
Therapy-Individual Therapy         9811         Encounter 20-30 Min         0         0         \$0					0		\$0	\$0	\$0	0
Therapy-Individual Therapy         90812         Encounter 45-50 Min         0         0         \$	- Company of the Comp		90810	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy         90813         Encounter 45-50 Min         0         0         \$			90811	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
				Encounter 45-50 Min	0	0		\$0	\$0	0
Therapy-Individual Therapy 90814 Encounter 75-80 Min 0 0 \$0 \$0 \$0 0 0				Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
	Therapy-Individual Therapy		90814	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

Principage   Pri	Montcalm			Unit						
Part	Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Decay Services   19637   Seconary Script   0   0   50   51   50   0   1   50   0   1   50   0   1   50   0   1   50   0   1   50   0   1   50   0   1   50   0   1   50   0   1   50   0   50   5	Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Description	Therapy-Individual Therapy		90816	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Penergy-Park Description   96011   Penergy Park Description   9   9   9   9   9   9   9   9   9	Therapy-Individual Therapy		90817	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Thems provisional Therety   1962	Therapy-Individual Therapy		90818	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Penergy Judy Directy	Therapy-Individual Therapy		90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Descript Online   1968   196	Therapy-Individual Therapy		90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Interpay analystate   Security	Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Enterps   1963;   Encounter   5-30 Max   0   0   10   10   30   30   0     Entropy Entrobland Theory   1962;   Encounter   5-30 Max   0   0   10   10   10   30   0     Entropy Entrobland Theory   1962;   Encounter   7-30 Max   0   0   0   10   10   30   0     Entropy Entrobland Theory   1964;   Entropy Entropy Entropy   1964;   Entropy Entropy   1964;   Entropy Entropy Entropy   1964;   Entropy Entropy Entropy   1964;   Entropy Entr	Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Perspansisher   1962	Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Description   1908	Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pennagy Penn	Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
	Therapy-Individual Therapy		90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Pennary Family Therapy   9044   Benouster   0   0   0   50   50   0   1     Pennary Family Therapy   9044   Benouster   0   0   0   50   50   50   0   0     Pennary Family Therapy   9045   Benouster   24   221   \$4,024   \$159   39   0     Pennary Family Therapy   9045   Benouster   24   221   \$4,024   \$159   39   0     Pennary Family Therapy   9045   Benouster   24   221   \$4,024   \$159   39   0     Pennary Family Therapy   9045   Benouster   17   622   \$16,025   \$143   \$122   4     Additional Codes ECIT Physician   90470   Benouster   0   0   50   50   50   50   0     Additional Codes ECIT Physician   90487   Benouster   0   0   50   50   50   50   0     Specch & Lauguage Therapy   92506   Benouster   0   0   50   50   50   50   0     Specch & Lauguage Therapy   92506   Benouster   0   0   50   50   50   50   0     Specch & Lauguage Therapy   92508   Benouster   0   0   50   50   50   50   0     Specch & Lauguage Therapy   92508   Benouster   0   0   50   50   50   50   0     Specch & Lauguage Therapy   92508   Benouster   0   0   50   50   50   50   0     Specch & Lauguage Therapy   92508   Benouster   0   0   50   50   50   50   0     Specch & Lauguage Therapy   92508   Benouster   0   0   50   50   50   50   0     Specch & Lauguage Therapy   92508   Benouster   0   0   50   50   50   50   0     Specch & Lauguage Therapy   92508   Benouster   0   0   50   50   50   50   0     Specch & Lauguage Therapy   92509   Benouster   0   0   50   50   50   50   0     Specch & Lauguage Therapy   92509   Benouster   0   0   50   50   50   50   0     Specch & Lauguage Therapy   92509   Benouster   0   0   50   50   50   50   0     Specch & Lauguage Therapy   92509   Benouster   0   0   50   50   50   50   0     Specch & Lauguage Therapy   92509   Benouster   0   0   50   50   50   0   0     Specch & Lauguage Therapy   92509   Benouster   0   0   50   50   50   0   0     Specch & Lauguage Therapy   92500   Benouster   0   0   0   50   50   50   0     Specch & Lauguage Therapy   92500   Benouster   0   0   0   50   50   5	Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy Family Desay   1908/9   100   10   10   10   10   10   10	Therapy-Family Therapy		90846	Encounter	0	0	\$0	\$0	\$0	0
Exemple Personal Pe	Therapy-Family Therapy		90847	Encounter	5	8	\$721	\$144	\$90	2
Therapy-Group Therapy	Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Energy Group Therapy   90857	Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Medication Review         95862         Encounter         175         623         \$76,005         \$435         \$122         4           Additional Codes ECT Physician         \$9670         Encounter         0         0         \$50         \$50         \$0         0           Speech & Language Therapy         \$92871         Encounter         0         0         \$50         \$0         \$0           Speech & Language Therapy         \$22567         Encounter         0         0         \$50         \$0         \$0           Speech & Language Therapy         \$22588         Encounter         0         0         \$0         <	Therapy-Group Therapy		90853	Encounter	24	221	\$8,624	\$359	\$39	9
Machinant Codes ECT Physician   90870   Encounter   0   0   0   50   50   50   0   0   0	Therapy-Group Therapy	-	90857	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Defend   98887   Encounter   0	Medication Review		90862	Encounter	175	623	\$76,095	\$435	\$122	4
	Additional Codes-ECT Physician		90870	Encounter	0	0	\$0	\$0	\$0	0
Speech & Lategauge Therapy	Assessments-Other		90887	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	Speech & Language Therapy		92506	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	Speech & Language Therapy		92507	Encounter	0	0	\$0	\$0	\$0	0
Page	Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other	Speech & Language Therapy		92526	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other	Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other   96110   Encounter   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessments-Testing		96100	Hour	4	19	\$2,948	\$737	\$155	5
Sasessments-Other   96111   Encounter   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessments-Other		96105	Encounter	0	0		\$0	\$0	0
Assessments-Testing         96115         Hour         0         0         \$0         \$10         \$10         \$6         \$3         \$10         \$10         \$3         \$100         \$10         \$6         \$3         \$3         \$3         \$3         \$100         \$50         \$3	Assessments-Other		96110	Encounter	0	0		\$0	\$0	
Assessments-Testing         96117         Hour         1         3         \$190         \$190         \$63         3           Physical Therapy         97002         Encounter         0         0         \$50         \$50         \$0         0           Cecupational Therapy         97002         Encounter         1         1         \$173	Assessments-Other		96111	Encounter	0	0				
Physical Therapy   97001   Encounter   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessments-Testing		96115	Hour	0	0				
Physical Therapy   97002   Encounter   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessments-Testing		96117	Hour	1	3				
Occupational Therapy         97003         Encounter         1         1         \$173<	Physical Therapy			Encounter						
Occupational Therapy         97004         Encounter         0         0         \$0         <	Physical Therapy			Encounter	0	0				
Occupational or Physical Therapy         97110         15 Minutes         0         0         \$0 </td <td>Occupational Therapy</td> <td></td> <td></td> <td>Encounter</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Occupational Therapy			Encounter						
Occupational or Physical Therapy         97112         15 Minutes         0         0         \$0 </td <td>Occupational Therapy</td> <td></td> <td>97004</td> <td>Encounter</td> <td>0</td> <td>0</td> <td></td> <td></td> <td></td> <td></td>	Occupational Therapy		97004	Encounter	0	0				
Occupational or Physical Therapy         97113         15 Minutes         0         0         \$0 </td <td>Occupational or Physical Therapy</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Occupational or Physical Therapy									
Occupational or Physical Therapy         97116         15 Minutes         0         0         \$0 </td <td>Occupational or Physical Therapy</td> <td></td> <td>97112</td> <td>15 Minutes</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Occupational or Physical Therapy		97112	15 Minutes						
Occupational or Physical Therapy         97124         15 Minutes         0         0         \$0 </td <td>Occupational or Physical Therapy</td> <td></td> <td>97113</td> <td>15 Minutes</td> <td>0</td> <td></td> <td></td> <td></td> <td></td> <td></td>	Occupational or Physical Therapy		97113	15 Minutes	0					
Occupational or Physical Therapy         97140         15 Minutes         0         0         \$0 </td <td>Occupational or Physical Therapy</td> <td></td> <td>97116</td> <td>15 Minutes</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Occupational or Physical Therapy		97116	15 Minutes						
Occupational or Physical Therapy         97150         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Occupational or Physical Therapy									
Occupational Therapy         97504         15 Minutes         0         0         \$0	Occupational or Physical Therapy									
Occupational or Physical Therapy         97530         15 Minutes         0         0         \$0 </td <td>Occupational or Physical Therapy</td> <td></td> <td></td> <td>Encounter</td> <td>0</td> <td></td> <td></td> <td></td> <td></td> <td></td>	Occupational or Physical Therapy			Encounter	0					
Occupational or Physical Therapy         97532         15 Minutes         0         0         \$0 </td <td>Occupational Therapy</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Occupational Therapy									
Occupational or Physical Therapy         97533         15 Minutes         0         0         \$0 </td <td>Occupational or Physical Therapy</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Occupational or Physical Therapy									
Occupational or Physical Therapy         97535         15 Minutes         0         0         \$0 </td <td>Occupational or Physical Therapy</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Occupational or Physical Therapy									
Occupational or Physical Therapy         97537         15 Minutes         0         0         \$0 </td <td>Occupational or Physical Therapy</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Occupational or Physical Therapy									
Occupational or Physical Therapy         97542         15 Minutes         0         0         \$0 </td <td>Occupational or Physical Therapy</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Occupational or Physical Therapy									
	Occupational or Physical Therapy									
Occupational Therapy         97703         15 Minutes         0         0         \$0	Name of the state									
	Occupational Therapy		97703	15 Minutes	0	0	\$0	\$0	\$0_	0

Montcalm			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Occupational Therapy		97750	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803	15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804	30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238	30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	<del></del>	99271	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506	Encounter	0	0	\$0	\$0	\$0	0_
Transportation		A0080	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120		0	0	\$0	\$0	\$0	0
Transportation		A0130		0	0	\$0	\$0	\$0	0
Transportation		A0140		0	0	\$0	\$0	\$0	0_
Transportation		A0170		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation	_	A0425	Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427	Refer to Code Descriptions	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428		0	0	\$0	\$0	\$0	0

Montcalm			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	\$0	\$0	\$0	0_
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings		D0274		0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0_
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351		0	0	\$0	\$0	\$0	0
Assessment		H0002	Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018	Days	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025	Face to Face Contact	117	243	\$46,023	\$393	\$189	2
Assessment		H0031	Encounter	317	331	\$90,193	\$285	\$272	1
Treatment Planning		H0032	Encounter	291	803	\$30,149	\$104	\$38	3
Health Services		H0034	15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043	Per diem	0	0	\$0	\$0	\$0	0_
Respite		H0045	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000	Encounter	4	7	\$1,254	\$314	\$179	2
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	275	1,392	\$73,237	\$266	\$53	5
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	Per Diem	8	1,406	\$30,006	\$3,751	\$21	176
Community Living Supports (Daily)		H2016	Per Diem	3	669	\$29,457	\$9,819	\$44	223
Community Living Supports (Daily)		H2016	Per Diem	1	100	\$12,558	\$12,558	\$126	100
Behavior Services		H2019	15 Minutes	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023	15 minutes	2	4,455	\$8,407	\$4,204	\$2	2,228
Mental Health Therapy		H2027	15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	52	61,767	\$387,614	\$7,454	\$6	1,188
Medication Review		M0064	Encounter Face-to-Face	78	231	\$7,737	\$99	\$33	3
Transportation		S0209	Per Mile	0	0	\$0	\$0	\$0	0_
Transportation		S0215	Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110	15 Minutes	0	0	\$0	\$0	\$0	0_
Family Training		\$5111	Encounter	7	96	\$18,772	\$2,682	\$196	14
Foster Care		S5140	Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145	Days	0	0	\$0	\$0	\$0	0
Respite		S5150	15 Minutes	0	0	\$0	\$0	\$0	0

Montcalm	Revenue Code	HCPCS Code	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Service Category	Revenue Code								
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470	Encounter	1	7	\$165	\$165	\$24	7
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	0	0	\$0	\$0	\$0	0
Reidential Room and Board		S9976	Days	0	0	\$0	\$0	\$0	0
Assessment		T1001	Encounter	10	12	\$4,990	\$499	\$416	1
Health Services		T1002	Up to 15 min	11	384	\$33,190	\$3,017	\$86	35
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	1	556	\$2,950	\$2,950	\$5	556
Supports Coordination/Wrap Facilitation		T1016	15 minutes	21	302	\$21,073	\$1,003	\$70	14
Targeted Case Management		T1017	15 minutes	212	5,256	\$368,270	\$1,737	\$70	25
Nursing Home Mental Health Monitoring		T1017	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	Days	9	1,703	\$17,671	\$1,963	\$10	189
Personal Care in Licensed Specialized Residential Setting		T1020	Days	1	365	\$13,231	\$13,231	\$36	365
Personal Care in Licensed Specialized Residential Setting	-	T1020	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023	Encounter	172	253	\$100,145	\$582	\$396	1
Enhanced Medical Supplies or Pharmacy		T1999	Items	0	0	\$0	\$0	\$0	0
Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	37	2,001	\$72,310	\$1,954	\$36	54
Transportation		T2004		24	411	\$1,387	\$58	\$3	17
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	0	0	\$9,303	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance	-	T2038	Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				0	0	\$0	\$0	\$0	0
Other				0	0	\$0	\$0	\$0	0
Total Population and Cost				899		\$2,243,369			

Muskegon			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		Days	31	1,732	\$398,680	\$12,861	\$230	56
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154	,	Days	10	55	\$18,010	\$1,801	\$327	6
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		Days	126	1,123	\$406,906	\$3,229	\$362	9
Inpatient Hospital Ancillary Services - Room and Board	0144		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320		# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370		,	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450		# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636		# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740		# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762		Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901		Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919		# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912		Days	4	17	\$2,376	\$594	\$140	4
Outpatient Partial Hospitalization	0913		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942		# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104	Minutes	. 0	0	<b>\$</b> 0	\$0	\$0	0
Medication Administration		90782	Encounter	90	840	\$19,327	\$215	\$23	9
Medication Administration		90788	Encounter	. 0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801	Encounter	388	406	\$114,194	\$294	\$281	1
Assessment-Psychiatric Assessment		90802	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804	Encounter 20-30 Min	273	442	\$78,661	\$288	\$178	2
Therapy-Individual Therapy		90805	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806	Encounter 45-50 Min	935	6,538	\$1,177,053	\$1,259	\$180	7
Therapy-Individual Therapy		90807	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808	Encounter 75-80 Min	431	510	\$126,044	\$292	\$247	1
Therapy-Individual Therapy		90809	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812	Encounter 45-50 Min	0	0	\$0	\$0	\$0	
Therapy-Individual Therapy		90813	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

Fiscal Year 2004-2005

Muskegon			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816	Encounter 20-30 Min	1	5	\$394	\$394	\$79	5
Therapy-Individual Therapy		90817	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818	Encounter 45-50 Min	1	9	\$708	\$708	\$79	9
Therapy-Individual Therapy		90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847	Encounter	13	28	\$2,999	\$231	\$107	2
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853	Encounter	86	931	\$131,599	\$1,530	\$141	11
Therapy-Group Therapy		90857	Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862	Encounter	1,275	4,312	\$504,076	\$395	\$117	3
Additional Codes-ECT Physician		90870	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96100	Hour	10	20	\$4,578	\$458	\$229	2
Assessments-Other		96105	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115	Hour	0	0	\$0	\$0	\$0	0
Assessments-Testing		96117	Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003	Encounter	1	1	\$211	\$211	\$211	1
Occupational Therapy		97004	Encounter	11	2	\$298	\$298	\$149	2
Occupational or Physical Therapy		97110	15 Minutes	1	87	\$4,512	\$4,512	\$52	87
Occupational or Physical Therapy		97112	15 Minutes	0	0	\$0	\$0	<b>\$</b> 0	0
Occupational or Physical Therapy		97113	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116	15 Minutes	1	39	\$2,180	\$2,180	\$56	39
Occupational or Physical Therapy		97124	15 Minutes	1	50	\$2,974	\$2,974	\$59	50
Occupational or Physical Therapy		97140	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150	Encounter	149	374	\$114,282	\$767	\$306	3
Occupational Therapy		97504	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	1	2	\$88	\$88	\$44	2
Occupational or Physical Therapy		97532	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535	15 Minutes	1	44	\$2,886	\$2,886	\$66	44
Occupational or Physical Therapy		97537	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542	15 Minutes	1	23	\$1,523	\$1,523	\$66	23
Occupational Therapy		97703	15 Minutes	0	0	\$0	\$0	\$0	0

Muskegon			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Occupational Therapy		97750	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802	15 Minutes	2	2	\$157	\$79	\$79	1
Assessment or Health Services		97803	15 Minutes	4	34	\$2,676	\$669	\$79	9
Health Services		97804	30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204	Encounter	0	0	<b>\$</b> 0	\$0	\$0	0
Additional Codes-Physician Services		99205	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213	Encounter	372	376	\$121,881	\$328	\$324	1
Additional Codes-Physician Services		99214	Encounter	45	47	\$9,732	\$216	\$207	1
Additional Codes-Physician Services		99215	Encounter	87	88	\$31,162	\$358	\$354	1
Additional Codes-Physician Services		99221		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238	30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252	Encounter	8	8	\$3,588	\$448	\$448	1
Additional Codes-Physician Services		99253	Encounter	1	1	\$4	\$4	\$4	1
Additional Codes-Physician Services		99254	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262	Encounter	11	11	\$3,823	\$348	\$348	1
Additional Codes-Physician Services	4111	99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	***	99275	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506	Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120		0	0	\$0	\$0	\$0	0
Transportation		A0130		0	0	\$0	\$0	\$0	0
Transportation		A0140		0	0	\$0	\$0	\$0	0
Transportation		A0170		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425	Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427	Refer to Code Descriptions	3	4	\$1,014	\$338	\$254	1
Additional codes - Transportation	- Martin	A0428	1	0	0	\$0	\$0	\$0	0
				<del></del>					

Muskegon			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	00	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings		D0274		0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351		0	0	\$0	\$0	\$0	0
Assessment		H0002	Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018	Days	14	100	\$16,027	\$1,145	\$160	7
Prevention Services - Direct Model		H0025	Face to Face Contact	1	1	\$79	<b>\$</b> 79	\$79	I
Assessment		H0031	Encounter	64	76	\$4,056	\$63	\$53	1
Treatment Planning		H0032	Encounter	97	767	\$140,738	\$1,451	\$183	8
Health Services		H0034	15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		148	0	\$66,707	\$451	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	134	25,082	\$2,197,846	\$16,402	\$88	187
Community Living Supports in Independent living/own home		H0043	Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000	Encounter	46	108	\$5,548	\$121	\$51	2
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	755	3,831	\$648,470	\$859	\$169	5
Skill-Building and Out of Home Non Vocational Habilitation	•	H2014	15 minutes	11	15,325	\$455,571	\$41,416	\$30	1,393
Community Living Supports (15 Minutes)		H2015	15 Minutes	23	3,275	\$7,831	\$340	\$2	142
Community Living Supports (Daily)		H2016	Per Diem	11	1,746	\$37,560	\$3,415	\$22	159
Community Living Supports (Daily)		H2016	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	Per Diem	282	19,962	\$1,875,158	\$6,649	\$94	71
Behavior Services		H2019	15 Minutes	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023	15 minutes	22	10,194	\$13,364	\$607	\$1	463
Mental Health Therapy		H2027	15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	139	83,746	\$637,109	\$4,584	\$8	602
Medication Review		M0064	Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209	Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215	Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110	15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111	Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140	Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145	Days	0	0	\$0	\$0	\$0	0
Respite		S5150	15 Minutes	3	1,650	\$889	\$296	\$1	550

Muskegon			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	2	2	\$209	\$105	\$105	1
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	7	245	\$19,284	\$2,755	\$79	35
Health Services		S9446	Encounter	1	2	\$157	\$157	\$79	2
Health Services		S9470	Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	0	0	\$0	\$0	\$0	0
Reidential Room and Board		S9976	Days	279	20,942	\$284,670	\$1,020	\$14	75
Assessment		T1001	Encounter	6	27	\$970	\$162	\$36	5
Health Services		T1002	Up to 15 min	1,691	9,147	\$1,583,452	\$936	\$173	5
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016	15 minutes	928	37,502	\$4,615,671	\$4,974	\$123	40
Targeted Case Management		T1017	15 minutes	15	150	\$21,667	\$1,444	\$144	10
Nursing Home Mental Health Monitoring		T1017	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	Days	57	4,006	\$33,680	<b>\$5</b> 91	\$8	70
Personal Care in Licensed Specialized Residential Setting		T1020	Days	230	13,898	\$501,892	\$2,182	\$36	60
Personal Care in Licensed Specialized Residential Setting		T1020	Days	151	3,598	\$338,921	\$2,245	\$94	24
Assessments		T1023	Encounter	416	623	\$235,658	\$566	\$378	1
Enhanced Medical Supplies or Pharmacy		T1999	Items	482	3,140	\$198,140	\$411	\$63	7
Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	5	987	\$6,920	\$1,384	\$7	197
Transportation		T2004		0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	149	222	\$27,419	\$184	\$124	1
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	25	30	\$11,930	\$477	\$398	1
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				67	0	\$10,627	\$159	\$0	0
Other				6	0	\$6,784	\$1,131	\$0	0
Total Population and Cost				2,666		\$17,293,599			

	Network180			Unit						
Seminate   Part   Par	Service Category	Revenue Code	HCPCS Code		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Part	State Psychiatric Hospital - Inpatient PT22			Days	54	6,426	\$3,110,177	\$57,596	\$484	119
Part	State Mental Retardation Facility - Inpatient (ICF/MR) PT65			Days	0	0	\$0	\$0	\$0	0
194, 194, 194, 195, 196, 194, 194, 194, 194, 194, 194, 194, 194	Local Psychiatric Hospital/IMD PT68			Days	259	2,775	\$1,589,102	\$6,136	\$573	11
Special Hispath Ancelley Services - Leave of Above   0.35   50   50   50   50   50   50   50	Local Psychiatric Hospital - Acute Community PT73			Days	634	9,089	\$5,585,013	\$8,809	\$614	14
Parellet Repair Ancellary Services - Planemary   0,350-0254, 0275   F of farms   0   0   0   50   50   50   50   50	Inpatient Hospital Ancillary Services - Room and Board	0144		Days	0	0	\$0	\$0	\$0	0
Part	Inpatient Hospital Ancillary Services - Leave of Absence	0183		Days	0	0	\$0	\$0	\$0	0
Paper   Pape	Inpatient Hospital Ancillary Services - Pharmacy				0	0	\$0	\$0	\$0	0
Pagistral Haspiral Ancellary Services - Realibalogy	Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		# of items	0	0	\$0	\$0	\$0	0
Permitten Hospital Ancillary Services - Repitation Services   91	Inpatient Hospital Ancillary Services - Laboratory			# of tests	0	0	\$0	\$0	\$0	0
Patient Rogard Ancillary Services - Replatency Services   0410	Inpatient Hospital Ancillary Services - Radiology	0320		# of tests	0	0	\$0	\$0	\$0	0
	BCT Anesthesia	0370			0	0	\$0	\$0	\$0	0
	Inpatient Hospital Ancillary Services - Respiratory Services	0410		# of treatments	0	0	\$0	\$0	\$0	0
	Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		# of treatments	0	0	\$0	\$0	\$0	0
	Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434		# of treatments	0	0	\$0	\$0	\$0	0
	Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444		# of treatments	0	0	\$0	\$0	\$0	0
Injustice   Hospital Ancellary Services - Audiology   60   60   50   50   50   50   50   50	Inpatient Hospital Ancillary Services - Emergency Room	0450		# of visits	0	0	\$0	\$0	\$0	0
Inpatient Haspital Ancillary Services - Magnetic Resonance Technology (MRT)   0610-0611   8 of feets   0   0   0   50   50   30   30   0   0   0   0   0   0   0	Inpatient Hospital Ancillary Services - Pulmonary Function	0460		# of tests	0	0	\$0	\$0	\$0	0
Inpatien Haspital Ancillary Services - Pharmacy   0516   # of units   0   0   50   50   50   50   0   0   1   1   1   1   1   1   1	Inpatient Hospital Ancillary Services - Audiology	0470-0472		# of tests	0	0	\$0	\$0	\$0	0
ECT Recovery Recome	Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EKGIGCG	Inpatient Hospital Ancillary Services - Pharmacy	0636		# of units	0	0	\$0	\$0	\$0	0
Impation Hospital Ancillary Services - EEG	ECT Recovery Room	0710			0	0	\$0	\$0	\$0	0
Extended Observation Beds	Inpatient Hospital Ancillary Services -EKG/ECG			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes ECT Facility Charge   0901   Encounter   3   13   84,117   \$1,372   \$317   4   1   1   1   1   1   1   1   1   1	Inpatient Hospital Ancillary Services - EEG	0740		# of tests	0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Psychiatric Psychological Treatments/Services   Opin				Hour	0	0	\$0	\$0	\$0	0
Cupatient Partial Hospitalization   911	Additional Codes-ECT Facility Charge	0901		Encounter	3	13	\$4,117	\$1,372	\$317	4
Dupatient Partial Hospital Exertication   Op13					0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services   0925	Outpatient Partial Hospitalization			Days	222	1,015	\$176,860	\$797	\$174	5
Propertical Hospital Ancillary Services - Other Therapeutic Services   0940-0942   # of visits   0   0   0   \$50   \$50   \$50   0   0   0   0   0   0   0   0   0	Outpatient Partial Hospitalization	0913		Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia         00104         Minutes         13         1,105         \$8,215         \$632         \$7         85           Medication Administration         99782         Encounter         297         3,429         \$247,437         \$833         \$72         12           Medication Administration         99788         Encounter         0         0         \$0	Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925		# of tests	0	0	\$0	\$0	\$0	0
Medication Administration   90782   Encounter   297   3,429   \$247,437   \$833   \$72   12     Medication Administration   90788   Encounter   0   0   0   \$0   \$0   \$0   \$0   \$0	Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942		# of visits	0	0	\$0	\$0	\$0	0
Medication Administration   90788   Encounter   891   910   \$118,675   \$133   \$130   118,675   \$130   \$130   \$100	Additional Codes-ECT Anesthesia		00104	Minutes	13	1,105	\$8,215	\$632	\$7	85
Seessment-Psychiatric Assessment   Seessment   Seess	Medication Administration		90782	Encounter	297	3,429	\$247,437	\$833	\$72	12
Sessement-Psychiatric Assessment   Space   S	Medication Administration		90788	Encounter	0	0	\$0	\$0	\$0	0
Pherapy-Individual Therapy	Assessment-Psychiatric Assessment		90801	Encounter	891	910	\$118,675	\$133	\$130	1
Pherapy-Individual Therapy	Assessment-Psychiatric Assessment		90802	Encounter	0	0	\$0	\$0	\$0	0
Interapy-Individual Therapy         9886         Encounter 45-50 Min         2,041         11,058         \$853,754         \$418         \$77         \$5           Therapy-Individual Therapy         9887         Encounter 45-50 Min         0         0         \$0<	The state of the s				42	175	\$12,761	\$304	\$73	4
Interpy-Individual Therapy         9887         Encounter 45-50 Min         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$1,553         \$82         \$78         \$1           Interapy-Individual Therapy         90809         Encounter 75-80 Min         0         0         \$0	Therapy-Individual Therapy			Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy         90808         Encounter 75-80 Min         19         20         \$1,553         \$82         \$78         1           Therapy-Individual Therapy         90809         Encounter 75-80 Min         0         0         \$0	Therapy-Individual Therapy				2,041	11,058	\$853,754	\$418	\$77	5
Herapy-Individual Therapy         9889         Encounter 75-80 Min         0         0         \$0<	The state of the s				0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy         90810         Encounter 20-30 Min         0         0         \$					19	20	\$1,553		\$78	1
Herapy-Individual Therapy         90811         Encounter 20-30 Min         0         0         \$0						0	\$0	\$0	\$0	0
Therapy-Individual Therapy         90812         Encounter 45-50 Min         0         0         \$	- i					0				0
Therapy-Individual Therapy         90813         Encounter 45-50 Min         0         0         \$					0	0	\$0	\$0	\$0	0
						0				0
Therapy-Individual Therapy 0 90814 Encounter 75-80 Min 0 0 \$0 \$0 \$0 \$0 0	The state of the s									0
	Therapy-Individual Therapy		90814	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

Network180			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816	Encounter 20-30 Min	1	14	\$1,050	\$1,050	\$75	14
Therapy-Individual Therapy		90817	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818	Encounter 45-50 Min	1	6	\$450	\$450	\$75	6
Therapy-Individual Therapy		90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	****	90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853	Encounter	278	2,573	\$82,021	\$295	\$32	9
Therapy-Group Therapy		90857	Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862	Encounter	3,404	7,895	\$542,706	\$159	\$69	2
Additional Codes-ECT Physician		90870	Encounter	27	281	\$11,540	\$427	\$41	10
Assessments-Other		90887	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96100	Hour	1	1	\$70	\$70	\$70	11
Assessments-Other		96105	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110	Encounter	1	3	\$300	\$300	\$100	3
Assessments-Other		96111	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115	Hour	0	0	\$0	\$0	\$0	0
Assessments-Testing		96117	Hour	1	1	\$100	\$100	\$100	1
Physical Therapy		97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	-	97116	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140	15 Minutes		0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150	Encounter	0	0	\$0	\$0	\$0	
Occupational Therapy		97504	15 Minutes	0	. 0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535	15 Minutes	0	. 0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy Occupational Therapy		97542	15 Minutes	0	0	\$0	\$0	\$0	0
Оссирацина тистару	<del></del>	97703	15 Minutes	0	0	\$0	\$0	\$0	0

State of Michigan

## CMHSP Cost Data by Service Category

Network180			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Occupational Therapy		97750	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802	15 Minutes	14	24	\$532	\$38	\$22	2
Assessment or Health Services		97803	15 Minutes	33	212	\$3,816	\$116	\$18	6
Health Services		97804	30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	· · · · · ·	99215	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		127	142	\$20,910	\$165	\$147	1
Additional Codes-Physician Services		99222		1	İ	\$145	\$145	\$145	1
Additional Codes-Physician Services		99223		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		100	322	\$4,935	\$49	\$15	3
Additional Codes-Physician Services		99232		89	187	\$11,175	\$126	\$60	2
Additional Codes-Physician Services		99233		9	12	\$831	\$92	\$69	1
Additional Codes-Physician Services		99238	30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242	Encounter	33	33	\$2,863	\$87	\$87	1
Additional Codes-Physician Services		99243	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	·	99271	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506	Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120	2 01 0110 11 <b>4</b> ) 014	0	0	\$0	\$0 \$0	\$0	0
Transportation		A0130		0	0	\$0	\$0	\$0 \$0	0
Transportation	*	A0140		0	0	\$0	\$0	\$0	0
Transportation		A0170		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425	Per Mile	0		\$0	\$0	\$0	0
Additional Codes-Transportation		A0427	Refer to Code Descriptions	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0427 A0428	Refer to Code Descriptions	0	0	\$0	\$0	\$0	0
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Network180			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings		D0274		0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post	•	D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	21	108	\$8,100	\$386	\$75	5
Medication administration		G0351	Encounter	0	0	\$0	\$0	\$0	0
		H0002	Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		569	4,294	\$982,976	\$1,728	\$229	8
Crisis Residential Services			Days					\$18	9
Prevention Services - Direct Model		H0025	Face to Face Contact	31	277	\$4,981	\$161		
Assessment		H0031	Encounter	3,230	5,168	\$404,261	\$125	\$78	2
Treatment Planning		H0032	Encounter	14	25	\$14,987	\$1,071	\$599	2
Health Services		H0034	15 Minutes	30	260	\$123	\$4	\$0	9
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	191	4,138	\$190,870	\$999	\$46	22
Peer Directed and Operated Support Services		NA		0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	239	19,909	\$1,200,713	\$5,024	\$60	83
Community Living Supports in Independent living/own home		H0043	Per diem	4	340	\$34,718	\$8,680	\$102	85
Respite		H0045	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000	Encounter	27	35	\$2,337	\$87	\$67	1
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	1,193	8,710	\$493,671	\$414	\$57	7
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	6	19,737	\$19,531	\$3,255	\$1	3,290
Community Living Supports (15 Minutes)		H2015	15 Minutes	119	149,712	\$545,557	\$4,585	\$4	1,258
Community Living Supports (Daily)		H2016	Per Diem	49	10,982	\$313,026	\$6,388	\$29	224
Community Living Supports (Daily)		H2016	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	Per Diem	145	39,689	\$4,541,581	\$31,321	\$114	274
Behavior Services		H2019	15 Minutes	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023	15 minutes	256	116,423	\$690,116	\$2,696	\$6	455
Mental Health Therapy		H2027	15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	264	409,109	\$944,567	\$3,578	\$2	1,550
Medication Review		M0064	Encounter Face-to-Face	1,998	4,958	\$192,432	\$96	\$39	2
Transportation		S0209	Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215	Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110	15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111	Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140	Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145	Days	0	0	\$0	\$0	\$0	0
Respite		S5150	15 Minutes	0	0	\$0	\$0	\$0	0
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Network180			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	868	7,610	\$820,692	\$945	\$108	9
Health Services		S9446	Encounter	64	820	\$50,020	\$782	\$61	13
Health Services		S9470	Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	0	0	\$0	\$0	\$0	0
Reidential Room and Board		S9976	Days	0	0	\$138,342	\$0	\$0	0
Assessment		T1001	Encounter	99	455	\$21,881	\$221	\$48	5
Health Services		T1002	Up to 15 min	44	173	\$5,894	\$134	\$34	4
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016	15 minutes	64	1,262	\$76,780	\$1,200	\$61	20
Targeted Case Management		T1017	15 minutes	2,581	79,446	\$7,357,831	\$2,851	\$93	31
Nursing Home Mental Health Monitoring		T1017	15 minutes	168	4,025	\$253,122	\$1,507	\$63	24
Personal Care in Licensed Specialized Residential Setting		T1020	Days	121	33,449	\$484,521	\$4,004	\$14	276
Personal Care in Licensed Specialized Residential Setting		T1020	Days	29	5,011	\$172,007	\$5,931	\$34	173
Personal Care in Licensed Specialized Residential Setting		T1020	Days	18	4,409	\$333,794	\$18,544	\$76	245
Assessments		T1023	Encounter	0	0	\$0	\$0	\$0	. 0
Enhanced Medical Supplies or Pharmacy		T1999	Items	0	0	\$0	\$0	\$0	0
Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	1	19	\$931	\$931	\$49	19
Transportation		T2004		0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	0	0	\$415,776	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	<b>\$</b> 0	\$0	0
Housing Assistance		T2038	Month	127	274	\$115,599	\$910	\$422	2
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				1,044	0	\$396,379	\$380	\$0	0
Other				0	0	\$847,950	\$0	\$0	0
Total Population and Cost				7,563		\$34,467,174			

Newaygo			Unit						
Service Category	Revenue Code	HCPCS Code	Меаѕите	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		Days	3	125	\$64,383	\$21,461	\$515	42
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		Days	83	770	\$452,406	\$5,451	\$588	9
Inpatient Hospital Ancillary Services - Room and Board	0144		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320		# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444		# of treatments	0	0	\$0	\$0	\$0	. 0
Inpatient Hospital Ancillary Services - Emergency Room	0450		# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636		# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740		# of tests	. 0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762		Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901		Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919		# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912		Days	11	9	\$2,190	\$2,190	\$243	9
Outpatient Partial Hospitalization	0913		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942		# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104	Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90782	Encounter	0	0	\$0	\$0	\$0 \$0	0
Medication Administration		90788	Encounter	0	0	\$0	\$0		0
Assessment-Psychiatric Assessment		90801	Encounter	339	355	\$49,245	\$145	\$139 \$0	0
Assessment-Psychiatric Assessment		90802	Encounter	0	0	\$0	\$0		
Therapy-Individual Therapy		90804	Encounter 20-30 Min	136	229	\$12,683	\$93	\$55	2
Therapy-Individual Therapy		90805	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806	Encounter 45-50 Min	401	2,262	\$252,844	\$631	\$112 \$0	6
Therapy-Individual Therapy		90807	Encounter 45-50 Min	0	0	\$0	\$0 \$429	\$0 \$255	2
Therapy-Individual Therapy		90808	Encounter 75-80 Min	19	32	\$8,148			
Therapy-Individual Therapy		90809	Encounter 75-80 Min	0	0	\$0	\$0 \$94	\$0 \$71	- 0
Therapy-Individual Therapy		90810	Encounter 20-30 Min	3	4	\$283	·	\$71	0
Therapy-Individual Therapy		90811	Encounter 20-30 Min	0	0	\$0	\$0	\$118	4
Therapy-Individual Therapy		90812	Encounter 45-50 Min	6	26 0	\$3,078 \$0	\$513 \$0	\$118	0
Therapy-Individual Therapy		90813	Encounter 45-50 Min	0 8	15	\$3,220	\$403	\$215	
Therapy-Individual Therapy		90814	Encounter 75-80 Min	8	13	\$3,220	3403	\$215	

Newaygo			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	-	90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847	Encounter	32	88	\$9,901	\$309	\$113	3
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853	Encounter	44	1,747	\$110,804	\$2,518	\$63	40
Therapy-Group Therapy		90857	Encounter	16	19	\$2,595	\$162	\$137	1
Medication Review		90862	Encounter	294	1,013	\$118,260	\$402	\$117	3
Additional Codes-ECT Physician		90870	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	-	92507	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96100	Hour	16	62	\$5,679	\$355	\$92	4
Assessments-Other		96105	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115	Hour	0	0	\$0	\$0	\$0	0
Assessments-Testing		96117	Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703	15 Minutes	0	0	\$0	\$0	\$0	0

Additional Codes-Physician Services	99243	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99251	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99252	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99253	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99254	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99255	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99271	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99272	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99273	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99274	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99275	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration	99506	Encounter	0	0	\$0	\$0	\$0	0
Transportation	A0080	Per mile	0	0	\$0	\$0	\$0	0
Transportation	A0090	Per mile	0	0	\$0	\$0	\$0	0
Transportation	A0100	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation	A0110	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation	A0120		0	0	\$0	\$0	\$0	0
Transportation	A0130		0	0	\$0	\$0	\$0	0
Transportation	A0140		0	0	\$0	\$0	\$0	0
Transportation	A0170		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation	A0425	Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation	A0427	Refer to Code Descriptions	0	0	\$0	\$0	\$0	0
Additional codes - Transportation	A0428		0	0	\$0	\$0	\$0	0
Division of Quality Management and Planning - April 2006								
Michigan Department of Community Health		05/31/2006 - Revis	ed on 8/02/2006				Page 2d2- 1	133

## CMHSP Cost Data by Service Category

Newaygo			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	<b>\$</b> 0	\$0	\$0	0
Bitewings		D0274		0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant	*	D7310		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351		0	0	\$0	\$0	\$0	0
Assessment	·	H0002	Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018	Days	51	294	\$83,250	\$1,632	\$283	6
Prevention Services - Direct Model		H0025	Face to Face Contact	25	40	\$7,650	\$306	\$191	2
Assessment		H0031	Encounter	491	557	\$63,073	\$128	\$113	1
Treatment Planning	·	H0032	Encounter	417	473	\$59,655	\$143	\$126	1
Health Services		H0034	15 Minutes	27	93	\$5,099	\$189	\$55	3
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	0	0	\$86,085	\$0	\$0	0
Peer Directed and Operated Support Services		NA		0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	62	5,473	\$396,371	\$6,393	\$72	88
Community Living Supports in Independent living/own home		H0043	Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000	Encounter	5	5	\$188	\$38	\$38	1
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	145	417	\$23,250	\$160	\$56	3
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	2	34	\$4,433	\$2,217	\$130	17
Community Living Supports (15 Minutes)		H2015	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	Per Diem	2	706	\$8,644	\$4,322	\$12	353
Community Living Supports (Daily)		H2016	Per Diem	1	31	\$2,105	\$2,105	\$68	31
Community Living Supports (Daily)		H2016	Per Diem	2	439	\$100,583	\$50,292	\$229	220
Behavior Services		H2019	15 Minutes	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023	15 minutes	32	21,701	\$127,683	\$3,990	\$6	678
Mental Health Therapy		H2027	15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	0	0	\$0	\$0	\$0	0
Medication Review		M0064	Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209	Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215	Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110	15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111	Encounter	8	22	\$4,808	\$601	\$219	3
Foster Care		S5140	Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145	Days	0	0	\$0	\$0	\$0	0
Respite		S5150	15 Minutes	6	5,442	\$13,934	\$2,322	\$3	907
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Newaygo			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470	Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	33	41	\$3,588	\$109	\$88	1
Reidential Room and Board		S9976	Days	0	0	\$0	\$0	\$0	0
Assessment		T1001	Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002	Up to 15 min	363	1,801	\$81,776	\$225	\$45	5
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	31	17,161	\$82,696	\$2,668	\$5	554
Supports Coordination/Wrap Facilitation		T1016	15 minutes	4	25	\$1,318	\$330	\$53	6
Targeted Case Management		T1017	15 minutes	281	9,853	\$619,928	\$2,206	\$63	35
Nursing Home Mental Health Monitoring		T1017	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	Days	5	1,176	\$4,872	\$974	\$4	235
Personal Care in Licensed Specialized Residential Setting		T1020	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023	Encounter	165	690	\$27,750	\$168	\$40	4
Enhanced Medical Supplies or Pharmacy		T1999	Items	9	631	\$889	\$99	\$1	70
Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004		0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	5	6	\$2,820	\$564	\$470	1
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	C
Pharmacy (Drugs and Other Biologicals)				0	0	\$0	\$0	\$0	0
Other		-		40	0	\$24,668	\$617	\$0	0
Total Population and Cost				986		\$2,932,835			

North Country			Unit						
Service Category	Revenue Code	HCPCS Code	Меаѕите	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		Days	21	1,809	\$923,927	\$43,997	\$511	86
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		Days	11	107	\$57,609	\$5,237	\$538	10
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		Days	400	2,668	\$1,442,995	\$3,607	\$541	7
Inpatient Hospital Ancillary Services - Room and Board	0144		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320		# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450		# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636		# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740		# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762		Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901		Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919		# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912		Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942		# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104	Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90782	Encounter	64	800	\$51,225	\$800	\$64	13
Medication Administration		90788	Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801	Encounter	295	295	\$92,771	\$314	\$314	1
Assessment-Psychiatric Assessment		90802	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804	Encounter 20-30 Min	252	409	\$25,100	\$100	\$61	2
Therapy-Individual Therapy		90805	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806	Encounter 45-50 Min	1,024	5,917	\$680,288	\$664	\$115	6
Therapy-Individual Therapy		90807	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808	Encounter 75-80 Min	14	17	\$2,848	\$203	\$168	1
Therapy-Individual Therapy		90809	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810	Encounter 20-30 Min	1	1	\$68	\$68	\$68	1
Therapy-Individual Therapy		90811	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812	Encounter 45-50 Min	3	9	\$1,017	\$339	\$113	3
Therapy-Individual Therapy		90813	Encounter 45-50 Min	0	0	<b>\$</b> 0	\$0	\$0	0
Therapy-Individual Therapy		90814	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
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North Country			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	•	90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	<b>\$</b> 0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	10	11	\$1,213	\$121	\$110	1
Therapy-Family Therapy		90847	Encounter	74	163	\$18,216	\$246	\$112	2
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853	Encounter	62	501	\$31,986	\$516	\$64	8
Therapy-Group Therapy		90857	Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862	Encounter	833	2,731	\$269,695	\$324	\$99	3
Additional Codes-ECT Physician		90870	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506	Encounter	1	1	\$156	\$156	\$156	1
Speech & Language Therapy		92507	Encounter	1	19	\$1,800	\$1,800	\$95	19
Speech & Language Therapy	**	92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96100	Hour	9	26	\$3,867	\$430	\$149	3
Assessments-Other		96105	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing	**	96115	Hour	0	0	\$0	\$0	\$0	0
Assessments-Testing		96117	Hour	1	4	\$741	\$741	\$185	4
Physical Therapy		97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003	Encounter	4	4	\$1,152	\$288	\$288	1
Occupational Therapy		97004	Encounter	1	1	\$219	\$219	\$219	1
Occupational or Physical Therapy		97110	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	*	97140	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy  Occupational or Physical Therapy		97532	15 Minutes	1	8	\$234	\$234	\$29	8
Occupational or Physical Therapy  Occupational or Physical Therapy		97533	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy  Occupational or Physical Therapy		97535	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy  Occupational or Physical Therapy		97537	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy  Occupational or Physical Therapy		97542	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy Occupational Therapy	·····	97703	15 Minutes	0	0	\$0	\$0	\$0	0
Оссирацина Гиегару		21103	15 1-11111110						

North Country			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Occupational Therapy		97750	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802	15 Minutes	11	3	\$98	\$98	\$33	3
Assessment or Health Services		97803	15 Minutes	1	6	\$218	\$218	\$36	6
Health Services		97804	30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212	Encounter	0	0	\$0	\$0	\$0	0_
Additional Codes-Physician Services		99213	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	-	99238	30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243	Encounter	0	0	\$0	\$0	\$0	00
Additional Codes-Physician Services		99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506	Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120		0	0	\$0	\$0	\$0	0
Transportation		A0130		0	0	\$0	\$0	\$0	0
Transportation		A0140		0	0	\$0	\$0	\$0	0
Transportation		A0170		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425	Per Mile	23	2,138	\$13,659	\$594	\$6	93
Additional Codes-Transportation		A0427	Refer to Code Descriptions	8	8	\$3,139	\$392	\$392	1
Additional codes - Transportation		A0428		0	0	\$0	\$0	\$0	0

North Country			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings		D0274		0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392	* * * **	0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Peridontal, main	·	D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
		D7310		0	0	\$0	\$0	\$0	
Alveoloplasty in conjunction with extractions, per quadrant		D9920		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report					<u></u>	\$0	\$0	\$0 \$0	
Enhanced Medical Equipment-Supplies		E1399	Items	0	0			· · · · · · · · · · · · · · · · · · ·	0
Family Training/Support EBP only		G0177	Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351		0	0	\$0	\$0	\$0	0
Assessment		H0002	Encounter	244	264	\$30,536	\$125	\$116	1
Crisis Residential Services		H0018	Days	96	761	\$276,615	\$2,881	\$363	8
Prevention Services - Direct Model		H0025	Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031	Encounter	1,231	1,316	\$282,558	\$230	\$215	1
Treatment Planning		H0032	Encounter	1,309	1,719	\$241,613	\$185	\$141	1
Health Services		H0034	15 Minutes	191	758	\$29,641	\$155	\$39	4
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		149	5,120	\$102,277	\$686	\$20	34
Assertive Community Treatment (ACT)		H0039	15 Minutes	92	16,893	\$744,360	\$8,091	\$44	184
Community Living Supports in Independent living/own home		H0043	Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000	Encounter	3	3	\$199	\$66	\$66	1
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	512	2,403	\$141,010	\$275	\$59	5
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	14	11,509	\$40,005	\$2,858	\$3	822
Community Living Supports (15 Minutes)		H2015	15 Minutes	20	24,543	\$82,477	\$4,124	\$3	1,227
Community Living Supports (Daily)		H2016	Per Diem	2	657	\$15,897	\$7,949	\$24	329
Community Living Supports (Daily)		H2016	Per Diem	2	730	\$25,242	\$12,621	\$35	365
Community Living Supports (Daily)		H2016	Per Diem	104	5,292	\$1,050,101	\$10,097	\$198	51
Behavior Services		H2019	15 Minutes	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023	15 minutes	21	555	\$5,089	\$242	\$9	26
Mental Health Therapy		H2027	15 Minutes	0	0	\$0	\$0 \$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	205	231,813	\$883,498	\$4,310	\$4	1,131
Medication Review		M0064	Encounter Face-to-Face	658	1,764	\$116,175	\$177	\$66	3
Transportation		S0209	Per Mile	0	0	\$110,173	\$177	\$0	0
Transportation		S0215	Per Mile	0	0	\$0	\$0	\$0	0
Family Training								<u>:</u>	
Family Training Family Training		S5110	15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5111	Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140	Days	0	0	\$0	\$0	\$0	0
		S5145	Days	0	0	\$0	\$0	\$0	0
Respite		S5150	15 Minutes	3	826	\$890	\$297	\$1	275

Personal Binergency Regions System (PERS)   S310   Pers Defin   0   0   0   30   30   30   30   30	į č									U
Person   P	·	Povenua Coda	HCBCS Code		C	I Inita	0	ContiConn	Cont/I Init	H=it/Case
	Service Category	Revenue Code	ncres code	Measure	Cases	Units	Cost	Cost/Case	Cost/ Unit	Unit/Case
Personal Energency Responate System (FEES)   SS161   Month   0   0   50   50   50   50   50   50	Respite		\$5151	Per Diem	. 0	0	\$0	\$0	\$0	0
Environmental Medification   S5165   Service   0   0   50   30   50   50   50   50	Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Paquipments Ngstyles   S5199   Increm   0   0   50   50   50   50   50   50	Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Decapation of Physical Therapy   S890   Broouter   0   0   50   50   50   50   50   50	Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Health Service	Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Health Services	Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services   S9470   Encounter   2   4   5973   5487   5243   1   1   1   1   1   1   1   1   1	Health Services		S9445	Encounter	101	722	\$98,612	\$976	\$137	7
Intensive Crisis Stabilization Enrolled Program   S944   Hour   0   0   50   50   50     Rectiential Known and Board   S9976   Days   38   244   \$8,078   \$213   \$33     Assessment   T1001   Encounter   420   440   \$69,897   \$166   \$159     Helath Service   T1002   Up to 15 min   0   0   50   50   50     Helath Service   T1003   Up to 15 min   0   0   50   50   50     Helath Service   T1005   15 minutes   0   0   50   50   50     Helath Service   T1005   15 minutes   0   0   50   50   50     Helath Service   T1005   15 minutes   0   0   50   50   50     Helath Service   T1005   15 minutes   0   0   50   50   50     Helath Service   T1005   15 minutes   0   0   50   50   50     Helath Service   T1005   15 minutes   0   0   50   50     Supports Coordination/Wap Pacilitation   T1016   15 minutes   10   381   32,685   52,699   568     Target Cane Management   T1017   15 minutes   418   24,356   \$846,039   \$2,024   \$35     Target Cane Management   T1017   15 minutes   418   24,356   \$846,039   \$2,024   \$35     Target Cane Management   T1017   15 minutes   418   43,556   \$846,039   \$3,00   \$372   \$311     Personal Care in Lécensed Specialized Residential Setting   T1020   Days   104   6,337   \$56,035   \$539   \$39     Personal Care in Lécensed Specialized Residential Setting   T1020   Days   5   37   \$3,09   \$462   \$52     Assessment   T1023   Bacounter   280   343   \$42,180   \$151   \$123     Halath Service   T1023   Bacounter   1599   Herns   0   0   0   50   50     Tarasportation   T2004   Per Dem   0   0   50   50   50     Tarasportation   T2004   Per Dem   0   0   50   50   50     Tarasportation   T2004   Per Dem   0   0   50   50   50     Tarasportation   T2004   Per Dem   0   0   50   50   50     Tarasportation   T2004   T2004   T2004   T2004   T2004   T2004     Tarasportation   T2004   T200	Health Services		S9446	Encounter	0	0	\$0	\$0	\$0	0
Reidential Room and Board   S9976   Doys   38   244   \$8,078   \$213   \$33     Assessment	Health Services		S9470	Encounter	2	4	\$973	\$487	\$243	2
Proposit   Proposit   Proposit   Proposition   Propositi	Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	0	0	\$0	\$0	\$0	0
Health Services	Reidential Room and Board		S9976	Days	38	244	\$8,078	\$213	\$33	6
Health Services	Assessment		T1001	Encounter	420	440	\$69,897	\$166	\$159	1
Health Services	Health Services		T1002	Up to 15 min	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation   Tille   15 minutes   10   381   \$26,085   \$2,609   \$68     Targeted Case Management   1611   15 minutes   418   24,356   \$846,09   \$2,024   \$35     Narising Home Mental Health Monitoring   Tille   15 minutes   25   299   \$9,300   \$312   \$31     Personal Care in Licensed Specialized Residential Setting   Tilo20   Days   104   6,337   \$56,035   \$539   \$9     Personal Care in Licensed Specialized Residential Setting   Tilo20   Days   0   0   \$50   \$60   \$9     Personal Care in Licensed Specialized Residential Setting   Tilo20   Days   5   379   \$2,309   \$462   \$62     Personal Care in Licensed Specialized Residential Setting   Tilo20   Days   5   379   \$2,309   \$462   \$62     Assessments   Tilo30   Encounter   280   343   \$42,180   \$151   \$123     Enhanced Medical Supplies or Pharmacy   Tilo30   Encounter   Tilo30   Encounter   Tilo30   Tilo	Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Tagseted Case Management	Health Services		T1005	15 minutes	0	0	\$0	\$0	\$0	0
Nursing Home Mental Health Monitoring   T107   15 minutes   25   299   \$9,300   \$372   \$31     Personal Care in Licensed Specialized Residential Setting   T1020   Days   104   6,37   \$56,035   539   \$90     Personal Care in Licensed Specialized Residential Setting   T1020   Days   0   0   0   50   50     Personal Care in Licensed Specialized Residential Setting   T1020   Days   5   37   \$2,309   \$462   \$62     Personal Care in Licensed Specialized Residential Setting   T1020   Days   5   37   \$2,309   \$462   \$62     Assessments   T1023   Encounter   280   343   \$42,180   \$151   \$123     Enhanced Medical Supplies or Pharmacy   T1099   Items   0   0   0   \$0   \$0   \$0     Transportation   T2001   T200	Supports Coordination/Wrap Facilitation		T1016	15 minutes	10	381	\$26,085	\$2,609	\$68	38
Personal Care in Licensed Specialized Residential Setting   T1020   Days   Da	Targeted Case Management		T1017	15 minutes	418	24,356	\$846,039	\$2,024	\$35	58
Personal Care in Licensed Specialized Residential Setting T1020 Days 5 37 \$2,300 \$40 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$5	Nursing Home Mental Health Monitoring		T1017	15 minutes	25	299	\$9,300	\$372	\$31	12
Personal Care in Licensed Specialized Residential Setting   T1020   Days   5   37   \$2,309   \$462   \$62   \$62   \$62   \$63   \$65	Personal Care in Licensed Specialized Residential Setting		T1020	Days	104	6,337	\$56,035	\$539	\$9	61
Assessments   T1023   Encounter   280   343   \$42,180   \$151   \$123	Personal Care in Licensed Specialized Residential Setting		T1020	Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy   T1999   Items   0   0   50   50   50   50   50   50	Personal Care in Licensed Specialized Residential Setting		T1020	Days	5	37	\$2,309	\$462	\$62	7
Transportation   T2001   Per Diem   O   O   SO   SO   SO   SO   SO   Transportation   T2002   Per Diem   O   O   SO   SO   SO   SO   Transportation   T2003   Encounter / Trip   O   O   SO   SO   SO   SO   Transportation   T2004   O   O   SO   SO   SO   SO   SO   Transportation   T2004   O   O   SO   SO   SO   SO   SO   SO	Assessments		T1023	Encounter	280	343	\$42,180	\$151	\$123	I
Transportation   T2002   Per Diem   O   O   SO   SO   SO   SO   SO   Transportation   T2003   Encounter / Trip   O   O   SO   SO   SO   SO   SO   SO	Enhanced Medical Supplies or Pharmacy		T1999	Items	0	0	\$0	\$0	\$0	0
Transportation   T2003   Encounter / Trip   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation         T2004         0         0         \$0	Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation         T2005         0         0         \$0	Transportation		T2003	Encounter / Trip	0	0	\$0	\$0	\$0	0
PASRR Level II Screens         T2011         Evaluation         0         0         \$0	Transportation		T2004		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies         T2028         Items         0         0         \$0 <td>Transportation</td> <td></td> <td>T2005</td> <td></td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Transportation		T2005		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies         T2029         Items         0         0         \$0 <td>PASRR Level II Screens</td> <td></td> <td>T2011</td> <td>Evaluation</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	PASRR Level II Screens		T2011	Evaluation	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping         T2036         Encounter / Trip         0         0         \$0 <td>Enhanced Medical Equipment-Supplies</td> <td></td> <td>T2028</td> <td>Items</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping         T2037         Encounter / Trip         0         0         \$0 <td>Enhanced Medical Equipment-Supplies</td> <td></td> <td>T2029</td> <td>Items</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Housing Assistance         T2038         Month         0         0         \$0<	Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies         T2039         Items         0         0         \$0         \$0         \$0           Pharmacy (Drugs and Other Biologicals)         40         0         \$141,539         \$3,538         \$0           Other         0         0         \$0         \$0         \$0         \$0	Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	<b>\$</b> 0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)         40         0         \$141,539         \$3,538         \$0           Other         0         0         \$0         \$0         \$0         \$0         \$0	Housing Assistance		T2038	Month	0	0	\$0	\$0	\$0	0
Other 0 0 \$0 \$0 \$0 \$0	Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Other 0 0 \$0 \$0 \$0	Pharmacy (Drugs and Other Biologicals)				40	0	\$141,539	\$3,538	\$0	0
					0	0	\$0	\$0	\$0	0
Total Population and Cost 2,614 \$8,993,471	Total Population and Cost				2,614		\$8,993,471			

Northeast Michigan			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		Days	10	1,753	\$948,658	\$94,866	\$541	175
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		Days	50	297	\$239,372	\$4,787	\$806	6
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320		# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450		# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472		# of tests	0	0	\$0	\$0	\$0	. 0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636		# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			0	0	\$0	\$0	\$0_	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740		# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762		Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901		Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919		# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912		Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942		# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104	Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90782	Encounter	18	55	\$2,215	\$123	\$40	3
Medication Administration		90788	Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801	Encounter	334	344	\$90,160	\$270	\$262	1
Assessment-Psychiatric Assessment		90802	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804	Encounter 20-30 Min	72	94	\$3,962	\$55	\$42	1
Therapy-Individual Therapy		90805	Encounter 20-30 Min	. 0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806	Encounter 45-50 Min	251	1,178	\$86,884	\$346	\$74	5
Therapy-Individual Therapy		90807	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808	Encounter 75-80 Min	11	15	\$1,383	\$126	\$92	I
Therapy-Individual Therapy		90809	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy Therapy Individual Therapy		90811	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

Northeast Michigan			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	. 0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	4	4	\$298	\$74	\$74	1
Therapy-Family Therapy	***************************************	90847	Encounter	28	48	\$3,478	\$124	\$72	2
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853	Encounter	68	765	\$26,958	\$396	\$35	11
Therapy-Group Therapy		90857	Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862	Encounter	938	3,297	\$346,555	\$369	\$105	4
Additional Codes-ECT Physician		90870	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506	Encounter	1	1	\$120	\$120	\$120	1
Speech & Language Therapy		92507	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526	Encounter	I	23	\$2,519	\$2,519	\$110	23
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96100	Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other	*	96111	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115	Hour	16	42	\$2,455	\$153	\$58	3
Assessments-Testing		96117	Hour	1	1	\$308	\$308	\$308	1
Physical Therapy		97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532	15 Minutes	0	0	<b>\$</b> 0	\$0	\$0	0
Occupational or Physical Therapy		97533	15 Minutes	0	0	\$0	\$0	\$0	
Occupational or Physical Therapy		97535	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537	15 Minutes	0	0	\$0	\$0	\$0	
Occupational or Physical Therapy		97542	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703	15 Minutes	0	0	\$0	\$0	\$0	0
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Northeast Michigan			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Occupational Therapy		97750	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803	15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804	30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201	Encounter	6	6	\$337	\$56	\$56	1
Additional Codes-Physician Services		99202	Encounter	40	44	\$4,691	\$117	\$107	1
Additional Codes-Physician Services		99203	Encounter	20	21	\$3,771	\$189	\$180	1
Additional Codes-Physician Services		99204	Encounter	9	9	\$2,273	\$253	\$253	1
Additional Codes-Physician Services		99205	Encounter	2	2	\$673	\$337	\$337	1
Additional Codes-Physician Services		99211	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212	Encounter	10	10	\$561	\$56	\$56	1
Additional Codes-Physician Services		99213	Encounter	38	40	\$4,490	\$118	\$112	1
Additional Codes-Physician Services		99214	Encounter	74	84	\$15,219	\$206	\$181	1
Additional Codes-Physician Services		99215	Encounter	47	57	\$14,394	\$306	\$253	1
Additional Codes-Physician Services		99221		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238	30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251	Encounter	5	5	\$701	\$140	\$140	1
Additional Codes-Physician Services		99252	Encounter	12	12	\$3,232	\$269	\$269	1
Additional Codes-Physician Services		99253	Encounter	7	8	\$2,739	\$391	\$342	1
Additional Codes-Physician Services		99254	Encounter	3	3	\$1,347	\$449	\$449	1
Additional Codes-Physician Services		99255	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261	Encounter	1	1	\$56	\$56	\$56	1
Additional Codes-Physician Services		99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506	Encounter	0	0	\$0	<b>\$</b> 0	\$0	0
Transportation		A0080	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110	Per one-way trip	1	133	\$1,615	\$1,615	\$12	133
Transportation		A0120		0	0	\$0	\$0	\$0	0
Transportation		A0130		0	0	\$0	\$0	\$0	0
Transportation		A0140		0	0	\$0	\$0	\$0	0
Transportation		A0170		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425	Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427	Refer to Code Descriptions	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428		0	0	\$0	\$0	\$0	0

Northeast Michigan			Unit			_	0	0	11-3-10
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings		D0274		0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0	\$0	\$0	\$0	00
Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351		44	213	\$8,630	\$196	\$41	5
Assessment		H0002	Encounter	20	21	\$4,201	\$210	\$200	1
Crisis Residential Services		H0018	Days	. 0	0	\$0	\$0	\$0	. 0
Prevention Services - Direct Model		H0025	Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031	Encounter	697	726	\$102,790	\$147	\$142	1
Treatment Planning		H0032	Encounter	633	948	\$96,477	\$152	\$102	1
Health Services		H0034	15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		61	0	\$23,408	\$384	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	63	9,415	\$411,570	\$6,533	\$44	149
Community Living Supports in Independent living/own home		H0043	Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	316	1,476	\$29,579	\$94	\$20	5
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	1	4,980	\$16,555	\$16,555	\$3	4,980
Community Living Supports (15 Minutes)		H2015	15 Minutes	24	28,882	\$191,874	\$7,995	\$7	1,203
Community Living Supports (Daily)		H2016	Per Diem	2	613	\$19,721	\$9,860	\$32	307
Community Living Supports (Daily)		H2016	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	Per Diem	85	2,554	\$578,959	\$6,811	\$227	30
Behavior Services		H2019	15 Minutes	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023	15 minutes	3	1,319	\$10,971	\$3,657	\$8	440
Mental Health Therapy		H2027	15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	68	49,933	\$297,678	\$4,378	\$6	734
Medication Review		M0064	Encounter Face-to-Face	2	4	\$314	\$157	\$78	2
Transportation		S0209	Per Mile	- 0	0	\$0	\$0	\$0	0
Transportation Transportation		S0209	Per Mile	0	0	\$0	\$0	\$0	0
		S5110	15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5110	Encounter	0	0	\$0	\$0	\$0	0
Family Training Foster Care		S5111 S5140	Days	0	0	\$0	\$0	\$0	0
		S5145	Days	0		\$0	\$0	\$0	0
Foster Care									
Respite		S5150	15 Minutes	0	0	\$0	\$0	\$0	0

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Northeast Michigan			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470	Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program	•	S9484	Hour	0	0	\$0	\$0	\$0	0
Reidential Room and Board		S9976	Days	0	0	\$0	\$0	\$0	0
Assessment		T1001	Encounter	140	143	\$15,763	\$113	\$110	1
Health Services		T1002	Up to 15 min	35	166	\$8,018	\$229	\$48	5
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016	15 minutes	0	0	\$0	\$0	\$0	0
Targeted Case Management		T1017	15 minutes	268	9,714	\$408,384	\$1,524	\$42	36
Nursing Home Mental Health Monitoring		T1017	15 minutes	33	1,273	\$39,337	\$1,192	\$31	39
Personal Care in Licensed Specialized Residential Setting		T1020	Days	87	3,165	\$12,892	\$148	\$4	36
Personal Care in Licensed Specialized Residential Setting		T1020	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	Days	0	0	\$0	\$0	\$0	0
Assessments	1 2 3	T1023	Encounter	303	417	\$37,686	\$124	\$90	1
Enhanced Medical Supplies or Pharmacy	·-	T1999	Items	0	0	\$0	\$0	\$0	0
Transportation	-	T2001		0	0	\$0	\$0	\$0	0
Transportation	1 1000	T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	1	51	\$412	\$412	\$8	51
Transportation		T2004		0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				0	0	\$0	\$0	\$0	0
Other				60	0	\$42,467	\$708	\$0	0
Total Population and Cost				1,483		\$4,169,110			

Northern Lakes			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		Days	34	2,145	\$1,037,015	\$30,500	\$483	63
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		Days	27	386	\$118,120	\$4,375	\$306	14
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		Days	402	4,103	\$1,255,546	\$3,123	\$306	10
Inpatient Hospital Ancillary Services - Room and Board	0144		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320		# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450		# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460		# of tests	00	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636		# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740		# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762		Ноиг	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901		Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919		# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912		Days	28	142	\$33,577	\$1,199	\$236	5
Outpatient Partial Hospitalization	0913		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942		# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	***	00104	Minutes	1	30	\$112	\$112	\$4	30
Medication Administration		90782	Encounter	106	1,579	\$64,753	\$611	\$41	15
Medication Administration		90788	Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801	Encounter	1,256	1,677	\$318,066	\$253	\$190	1
Assessment-Psychiatric Assessment	·	90802	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	·	90804	Encounter 20-30 Min	305	501	\$25,682	\$84	\$51	2
Therapy-Individual Therapy		90805	Encounter 20-30 Min	1,039	3,124	\$272,234	\$262	\$87	3
Therapy-Individual Therapy		90806	Encounter 45-50 Min	1,025	5,850	\$629,734	\$614	\$108	6
Therapy-Individual Therapy		90807	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808	Encounter 75-80 Min	180	406	\$66,598	\$370	\$164	2
Therapy-Individual Therapy		90809	Encounter 75-80 Min	1	1	\$190	\$190	\$190	1
Therapy-Individual Therapy		90810	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy Therapy-Individual Therapy		90812	Encounter 45-50 Min	0	0	\$0	\$0	\$0	
Therapy-Individual Therapy Therapy-Individual Therapy		90813	Encounter 45-50 Min Encounter 75-80 Min	0	0	\$0 \$0	\$0 \$0	\$0 \$0	0
rnerapy-rnervicual incrapy		90814	Encounter /3-80 Min		Ü	20	\$0	\$0	0

Northern Lakes			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817	Encounter 20-30 Min	1	13	\$1,493	\$1,493	\$115	13
Therapy-Individual Therapy		90818	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819	Encounter 45-50 Min	2	3	\$689	\$345	\$230	2
Therapy-Individual Therapy		90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	10	13	\$1,533	\$153	\$118	1
Therapy-Family Therapy		90847	Encounter	58	134	\$17,172	\$296	\$128	2
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853	Encounter	305	2,358	\$145,047	\$476	\$62	8
Therapy-Group Therapy		90857	Encounter	0	0	\$0	\$0	\$0	0_
Medication Review		90862	Encounter	949	4,665	\$454,347	\$479	\$97	5
Additional Codes-ECT Physician		90870	Encounter	6	54	\$18,269	\$3,045	\$338	9
Assessments-Other		90887	Encounter	3	3	\$246	\$82	\$82	1
Speech & Language Therapy		92506	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526	Encounter	0	0	\$0	\$0	\$0	0_
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96100	Hour	8	28	\$4,593	\$574	\$164	4
Assessments-Other		96105	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110	Encounter	3	8	\$1,148	\$383	\$144	3
Assessments-Other		96111	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115	Hour	0	0	\$0	\$0	\$0	0
Assessments-Testing		96117	Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001	Encounter	1	1	\$149	\$149	\$149	1
Physical Therapy		97002	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003	Encounter	1	3	\$754	\$754	\$251	3
Occupational Therapy		97004	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113	15 Minutes	0	. 0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703	15 Minutes	0	0	\$0	\$0	\$0	0

**CMHSP Cost Data by Service Category** 

Fiscal Year 2004-2005

Northern Lakes			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Occupational Therapy		97750	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802	15 Minutes	2	24	\$640	\$320	\$27	12
Assessment or Health Services		97803	15 Minutes	78	626	\$16,686	\$214	\$27	8
Health Services		97804	30 Minutes	1	13	\$346	\$346	\$27	13
Additional Codes-Physician Services		99201	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232	<del></del> :	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238	30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	-	99255	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506	Encounter	13	43	\$1,763	\$136	\$41	3
Transportation		A0080	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120	-	0	0	\$0	\$0	\$0	0
Transportation		A0130		0	0	\$0	\$0	\$0	0
Transportation		A0140		0	0	\$0	\$0	\$0	0
Transportation		A0170		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425	Per Mile	1	1	\$603	\$603	\$603	1
Additional Codes-Transportation		A0427	Refer to Code Descriptions	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428		1	1	\$122	\$122	\$122	1
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Northern Lakes			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings		D0274		0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351	Liteouritei	0	0	\$0	\$0	\$0	0
Assessment		H0002	Encounter	258	329	\$40,476	\$157	\$123	1
Crisis Residential Services		H0018	Days	96	1,540	\$442,276	\$4,607	\$287	16
Prevention Services - Direct Model		H0025	Face to Face Contact	1	1,340	\$25	\$25	\$25	1
		H0023	Encounter	613	810	\$132,867	\$23 \$217	\$164	1
Assessment		H0031	Encounter	870	1,169	\$191,755	\$220	\$164	1
Treatment Planning		H0034	15 Minutes		1,169	\$344	\$115	\$25	5
Health Services			_	0	0	\$0	\$113	\$2.5	0
Community Psychiatric Supportive Treatment		H0037	Per diem				\$551	\$2	314
Peer Directed and Operated Support Services	· · · · · · · · · · · · · · · · · · ·	H0038	15 minutes	192	60,207	\$105,699	\$0	\$2 \$0	0
Peer Directed and Operated Support Services		NA	1536	0	0	\$0	\$4,849	\$60	81
Assertive Community Treatment (ACT)		H0039	15 Minutes	176	14,193	\$853,419 \$0	\$4,849	\$00	0
Community Living Supports in Independent living/own home		H0043	Per diem	0	0	\$0	\$0	\$0 \$0	0
Respite		H0045	Per Diem	9				\$246	2
Behavior Management Review		H2000	Encounter		22	\$5,413	\$601	\$246	0
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	\$0	\$0	\$75	9
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	549	5,176	\$389,425	\$709		
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	50	38,618	\$149,785	\$2,996	\$4	772
Community Living Supports (15 Minutes)		H2015	15 Minutes	244	39,806	\$169,020	\$693	\$4	163
Community Living Supports (Daily)		H2016	Per Diem	4	485	\$15,031	\$3,758	\$31	121
Community Living Supports (Daily)		H2016	Per Diem	28	4,723	\$248,838	\$8,887	\$53	169
Community Living Supports (Daily)		H2016	Per Diem	73	7,875	\$1,008,788	\$13,819	\$128	108
Behavior Services		H2019	15 Minutes	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023	15 minutes	60	34,878	\$135,279	\$2,255	\$4	581
Mental Health Therapy		H2027	15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	153	207,686	\$508,761	\$3,325	\$2	1,357
Medication Review		M0064	Encounter Face-to-Face	882	1,630	\$100,266	\$114	\$62	2
Transportation		S0209	Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215	Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110	15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111	Encounter	6	11	\$1,579	\$263	\$144	2
Foster Care		S5140	Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145	Days	0	0	\$0	\$0	\$0	0
Respite		S5150	15 Minutes	8	5,946	\$3,553	\$444	\$1	743

Northern Lakes			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470	Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	0	0	\$0	\$0	\$0	0
Reidential Room and Board		S9976	Days	0	0	\$0	\$0	\$0	0
Assessment		T1001	Encounter	176	197	\$28,275	\$161	\$144	1
Health Services		T1002	Up to 15 min	499	1,789	\$58,432	\$117	\$33	4
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	2	1,285	\$4,879	\$2,440	\$4	643
Supports Coordination/Wrap Facilitation		T1016	15 minutes	10	21	\$857	\$86	\$41	2
Targeted Case Management		T1017	15 minutes	1,158	34,303	\$1,400,513	\$1,209	\$41	30
Nursing Home Mental Health Monitoring		T1017	15 minutes	0	0	\$0	<b>\$</b> 0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	Days	32	5,459	\$101,511	\$3,172	\$19	171
Personal Care in Licensed Specialized Residential Setting		T1020	Days	10	2,722	\$154,660	\$15,466	\$57	272
Personal Care in Licensed Specialized Residential Setting		T1020	Days	6	1,904	\$192,762	\$32,127	\$101	317
Assessments		T1023	Encounter	409	629	\$90,280	\$221	\$144	2
Enhanced Medical Supplies or Pharmacy		T1999	Items	0	0	\$0	\$0	\$0	0
Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004		0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	443	482	\$275,506	\$622	\$572	1
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				0	0	\$0	\$0	\$0	0
Other				0	0	\$0	\$0	\$0	0
Total Population and Cost				3,453		\$11,297,499	-		

Page	Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Part	State Psychiatric Hospital - Inpatient PT22			Days	1	5	\$2,282	\$2,282	\$456	5
Control   Cont	State Mental Retardation Facility - Inpatient (ICF/MR) PT65			Days	0	0	\$0	\$0	\$0	0
Page	Local Psychiatric Hospital/IMD PT68			Days	80	643	\$429,278	\$5,366	\$668	8
Equation Happing Ancellary Services - Jense of Absence   038   039   050   0	Local Psychiatric Hospital - Acute Community PT73			Days	0	0	\$0	\$0	\$0	0
	Inpatient Hospital Ancillary Services - Room and Board	0144		Days	0	0	\$0	\$0	\$0	0
Pages   Page	Inpatient Hospital Ancillary Services - Leave of Absence	0183		Days	0	0	\$0	\$0	\$0	0
Paper   Pape	Inpatient Hospital Ancillary Services - Pharmacy				0	0	\$0	\$0	\$0	0
Paperie Reginal Ancillary Services - Radiology	Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		# of items	0	0	\$0	\$0	\$0	0
PCT Annaheman	Inpatient Hospital Ancillary Services - Laboratory			# of tests	0	0	\$0	\$0	\$0	0
	Inpatient Hospital Ancillary Services - Radiology	0320		# of tests	0	0	\$0	\$0	\$0	0
	ECT Anesthesia	0370			0	0	\$0	\$0	\$0	0
Experient Hospital Ancillary Services - Occupational Therapy   0430-0644	Inpatient Hospital Ancillary Services - Respiratory Services	0410		# of treatments	0	0	\$0	\$0	\$0	0
	Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		# of treatments	0	0	\$0	\$0	\$0	0
	Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434		# of treatments	0	0	\$0	\$0	\$0	0
	Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444		# of treatments	0	0	\$0	\$0	\$0	0
Experient Hospital Ancillary Services - Pulmonarry Function   0469   # of tests   0   0   0   0   0   0   0   0   0	Inpatient Hospital Ancillary Services - Emergency Room	0450		# of visits	0	0	\$0	\$0	\$0	0
Impation Haopital Ancillary Services - Magnetic Resonance Technology (MRT)		0460		# of tests	0	0	\$0	\$0	\$0	0
	Inpatient Hospital Ancillary Services - Audiology	0470-0472		# of tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611		# of tests	0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services -EKGVECG   0730   781   76 tests   0   0   0   50   50   50   0   1     Impatient Hospital Ancillary Services -EEG   0762   Hour   0   0   0   50   50   50   0     Additional Codes -ECT Facility Charge   0961   Encounter   0   0   50   50   50   50   0     Additional Codes -ECT Facility Charge   0961   Encounter   0   0   50   50   50   50   0     Couptaient Partial Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services   0961   For Services   0968   For Services	Inpatient Hospital Ancillary Services - Pharmacy	0636		# of units	0	0	\$0	\$0	\$0	0
Paper   Partial Ancillary Services - EEG	ECT Recovery Room	0710			0	0	\$0	\$0	\$0	0
Extended Observation Beds	Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	Inpatient Hospital Ancillary Services - EEG	0740		# of tests	0	0	\$0	\$0	\$0	0
Paper   Pape	Extended Observation Beds	0762		Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization   Opi1	Additional Codes-ECT Facility Charge	0901		Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization         0913         Days         0         0         \$0	Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services   0925	Outpatient Partial Hospitalization	0912		Days	0	0	\$0	\$0	\$0	0
Page	Outpatient Partial Hospitalization	0913		Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia         00104         Minutes         0         0         \$0	Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925		# of tests	0	0	\$0	\$0	\$0	0
Medication Administration         90782         Encounter         16         201         \$8,945         \$559         \$45         13           Medication Administration         90788         Encounter         0         0         \$0	Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942		# of visits	0	0	\$0	\$0	\$0	0
Medication Administration         90788         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$1         \$293         \$246         \$1           Assessment-Psychiatric Assessment         90802         Encounter         0         0         \$0	Additional Codes-ECT Anesthesia		00104	Minutes	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment         90801         Encounter         209         249         \$61,157         \$293         \$246         1           Assessment-Psychiatric Assessment         90802         Encounter         0         0         \$0	Medication Administration		90782	Encounter	16	201	\$8,945	\$559	\$45	13
Assessment - Psychiatric Assessment         99802         Encounter         0         0         \$0	Medication Administration		90788	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy   9804   Encounter 20-30 Min   102   208   \$10,492   \$103   \$50   2	Assessment-Psychiatric Assessment		90801	Encounter	209	249	\$61,157	\$293	\$246	1
Therapy-Individual Therapy   9805   Encounter 20-30 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessment-Psychiatric Assessment		90802	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy         9866         Encounter 45-50 Min         190         988         \$99,669         \$525         \$101         5           Therapy-Individual Therapy         99807         Encounter 45-50 Min         0         0         \$0	Therapy-Individual Therapy		90804	Encounter 20-30 Min	102	208	\$10,492	\$103	\$50	2
Therapy-Individual Therapy         99807         Encounter 45-50 Min         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$15         \$252         \$151         \$2           Therapy-Individual Therapy         99809         Encounter 75-80 Min         0         0         \$0	Therapy-Individual Therapy		90805	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy         99808         Encounter 75-80 Min         3         5         \$757         \$252         \$151         2           Therapy-Individual Therapy         99809         Encounter 75-80 Min         0         0         \$0	Therapy-Individual Therapy		90806	Encounter 45-50 Min	190	988	\$99,669	\$525	\$101	5
Therapy-Individual Therapy         9809         Encounter 75-80 Min         0         0         \$0	Therapy-Individual Therapy		90807	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy         9809         Encounter 75-80 Min         0         0         \$0			90808	Encounter 75-80 Min	3	5	\$757	\$252	\$151	2
Therapy-Individual Therapy         90811         Encounter 20-30 Min         0         0         \$			90809	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy         90812         Encounter 45-50 Min         0         0         \$	Therapy-Individual Therapy		90810	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy         90812         Encounter 45-50 Min         0         0         \$	Therapy-Individual Therapy		90811	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy         90813         Encounter 45-50 Min         0         0         \$	Therapy-Individual Therapy		90812	Encounter 45-50 Min		0	\$0	\$0	\$0	0
Therapy-Individual Therapy         90814         Encounter 75-80 Min         0         0         \$			90813	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
	Therapy-Individual Therapy		90814	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

CMHSP Cost Data	by Service Category
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Onaxion Code Data by Service Category		TIGGILD WILLIAM	ontar minoss		riscal I ca	1 2004-2003		State Of	Michigan
Northpointe			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817	Encounter 20-30 Min	0 _	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	- 0	\$0	\$0	\$0	0_
Therapy-Individual Therapy		90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	0	0	\$0	\$0	\$0	0_
Therapy-Family Therapy		90847	Encounter	16	20	\$3,026	\$189	\$151	1
Therapy-Family Therapy		90849	Encounter	7	19	\$2,875	\$411	\$151	3
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857	Encounter	65	812	\$81,915	\$1,260	\$101	12
Therapy-Group Therapy  Medication Review		90862	Encounter		0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90862	Encounter Encounter	436	2,221	\$272,739	\$626	\$123	5
Assessments-Other		90887	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507	Encounter	0	0	\$0 \$0	\$0	\$0	0
Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526	Encounter	0	0	\$0	\$0 \$0	\$0 \$0	0
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96100	Hour	7	22	\$3,329	\$476	\$151	3
Assessments-Other		96105	Encounter	0	0	\$3,329	\$0	\$131	0
Assessments-Other	•	96110	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111	Encounter	0	0	\$0	\$0	\$0	
Assessments-Testing		96115	Hour	0	0	\$0	\$0	\$0	
Assessments-Testing		96117	Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003	Encounter	19	20	\$5,569	\$293	\$278	1
Occupational Therapy		97004	Encounter	1	1	\$278	\$278	\$278	1
Occupational or Physical Therapy		97110	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532	15 Minutes	1	1	\$35	\$35	\$35	1
Occupational or Physical Therapy		97533	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535	15 Minutes	1	1	\$35	\$35	\$35	1
Occupational or Physical Therapy		97537	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703	15 Minutes	0	0	\$0	\$0	\$0	0

State of Michigan

Fiscal Year 2004-2005

Northpointe			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Occupational Therapy		97750	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802	15 Minutes	19	60	\$2,259	\$119	\$38	3
Assessment or Health Services		97803	15 Minutes	12	73	\$2,748	\$229	\$38	6
Health Services		97804	30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		11	11	\$734	\$67	\$67	1
Additional Codes-Physician Services		99222		21	21	\$1,402	\$67	\$67	1
Additional Codes-Physician Services		99223		2	2	\$134	\$67	\$67	1
Additional Codes-Physician Services		99231		27	109	\$7,276	\$269	\$67	4
Additional Codes-Physician Services		99232		14	26	\$1,736	\$124	\$67	2
Additional Codes-Physician Services		99233		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238	30 Minutes or less	1	1	\$67	\$67	\$67	1
Additional Codes-Physician Services		99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	_	99253	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274	Encounter	0	0	<b>\$</b> 0	\$0	\$0	0
Additional Codes-Physician Services		99275	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506	Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120		0	0	\$0	\$0	\$0	0
Transportation		A0130		0	0	\$0	\$0	\$0	0
Transportation		A0140		0	0	\$0	\$0	\$0	0
Transportation		A0170		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425	Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427	Refer to Code Descriptions	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428		0	0	\$0	\$0	\$0	0

Personal parameter   Persona	Northpointe			Unit						
Component of National Personal Person	Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Interest principal   10.229	General dental services		D0150		0	0	\$0	\$0	\$0	0
Barbon   1922	Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0_
Distribution   Persignation   1972   0   0   0   0   0   0   0   0   0	Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0_
Perplacata Acids	Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Part   Bard comp- centraline, ser   1931	Bitewings		D0274		0	0	\$0	\$0	\$0	0
Part bard corespond surfaces, and   100   10	Prophylaxis Adult		D1110		0	0	\$0	\$0	\$0	0
Pear   Marce surfects, and   California	Resin based comp-one surface, ant		D2330		0	0	\$0			0
Reth band compute surfaces, post   10291	Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Paris black comprise unificant, port   1978   198	Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Seal hand compulers arthrees, point   D2391   D3750   D0   D0   D0   D0   D0   D0   D0	Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Per-Per   Per	Resin based comp-two surfaces, post		D2392		0	0				0
Performancy	Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Perfect   Perf	Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Process   Proc	Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Definition Management/Journal by Pryort   Definition Management/Journal by Pryort   Definition Management/Journal by Pryort   Definition Management Mana	Surgical removal of erupted tooth		D7210		0	0	\$0			0
Embancon Necial Equipment Supple   15199   1500   15	Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0		\$0	\$0	0
Part   Part Part   Pa	Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Moderation alternation   1000   10   10   10   10   10   10	Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Maces   Mace	Family Training/Support EBP only		G0177	Encounter	7	59	\$5,952	\$850	\$101	8
Part   Prevention Servicers   Provention Se	Medication administration		G0351		00	0			\$0	0
Prevention Services - Direct Model	Assessment		H0002	Encounter	0	0				
Assessment   H0031	Crisis Residential Services		H0018	Days	0	0	\$0	\$0		0
Parallement Planning   He0032	Prevention Services - Direct Model		H0025	Face to Face Contact	1	1	\$505	\$505	\$505	1
Health Services	Assessment		H0031	Encounter	419	445	\$89,783			
Community Psychiatric Supportive Treatment   Fl0037   Per Dienet and Operated Support Services   Fl0038   Similates   Simila	Treatment Planning		H0032	Encounter	246	349	\$57,864	\$235		1
Peer Directed and Operated Support Services	Health Services		H0034	15 Minutes	75	294	\$13,083	\$174	\$45	4
Peer   Directed and Operated Support Services   NA   15 Minutes   54   9,0%   550,812   59,274   522   180	Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Maseritye Community Treatment (ACT)	Peer Directed and Operated Support Services		H0038	15 minutes	11	5,280	\$16,681	\$1,516	\$3	480
Part	Peer Directed and Operated Support Services					0			· · · · · · · · · · · · · · · · · · ·	
Pespite   Pespite   Pespite   Per Diem   15   168   \$20,983   \$1,399   \$125   11     Pelavior Management Review   1200   Encounter   1   6   \$2,318   \$2,18   \$386   6     Comprehensive Medication Services - EBP only   1200   15 minutes   0   0   0   \$0   \$0   \$0   \$0   \$0	Assertive Community Treatment (ACT)		H0039	15 Minutes						
Pelavior Management Review	Community Living Supports in Independent living/own home		H0043	Per diem						
Comprehensive Medication Services - EBP only   H2010   15 minutes   0   0   0   80   \$0   \$0   \$0   \$0	Respite			Per Diem						
Crisis Intervention-Non-enrolled Service   H2011   15 Minutes   233   1,136   \$64,255   \$277   \$57   55   \$55	Behavior Management Review			Encounter		6				
Skill-Building and Out of Home Non Vocational Habilitation   H2014   15 minutes   97   102,958   \$398,447   \$4,108   \$4   1,061   1,005   1,	Comprehensive Medication Services - EBP only							·		
Community Living Supports (15 Minutes)   H2016   Per Diem   1   7   S201   S201   S20   7	Crisis Intervention-Non-enrolled Service			15 Minutes						
Community Living Supports (Daily)         H2016         Per Diem         1         7         \$201         \$201         \$29         7           Community Living Supports (Daily)         H2016         Per Diem         0         0         \$0 </td <td>Skill-Building and Out of Home Non Vocational Habilitation</td> <td></td> <td>H2014</td> <td>15 minutes</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes						
Community Living Supports (Daily)         H2016         Per Diem         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$1,080,915         \$36,031         \$200         \$180           Behavior Services         H2019         15 Minutes         0         0         0         \$0 <td>Community Living Supports (15 Minutes)</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Community Living Supports (15 Minutes)									
Community Living Supports (Daily)   HZ016   Per Diem   30   5,403   \$1,080,915   \$36,031   \$200   180	Community Living Supports (Daily)	***								
Behavior Services         H2019         15 Minutes         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$1         \$1,472           Mental Health Therapy         H2027         15 Minutes         0         0         \$0	Community Living Supports (Daily)									
Supported Employment Services         H2023         15 minutes         43         63,314         \$275,277         \$6,402         \$4         1,472           Mental Health Therapy         H2027         15 Minutes         0         0         \$	Community Living Supports (Daily)									
Mental Health Therapy         H2027         15 Minutes         0         0         \$0	Behavior Services									
Clubbouse Psychosocial Rehabilitation Programs         H2030         15 Minutes         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$2	Supported Employment Services									
Medication Review         M0064         Encounter Face-to-Face         60         137         \$7,138         \$119         \$52         2           Transportation         \$0.00         Per Mile         0         0         \$0	Mental Health Therapy									
Transportation         S0209         Per Mile         0         0         \$0 </td <td>Clubhouse Psychosocial Rehabilitation Programs</td> <td>** * - 1</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Clubhouse Psychosocial Rehabilitation Programs	** * - 1								
Transportation         S0215         Per Mile         0         0         \$0 </td <td>Medication Review</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Medication Review									
Family Training         S5110         15 Minutes         0         0         \$					·					
Family Training         S5111         Encounter         0         0         \$0	Transportation				••••					
Foster Care         S5140         Days         0         0         \$0	Family Training				_					
Foster Care S5145 Days 0 0 \$0 \$0 \$0 \$0 \$0 0	Family Training									
				<u>.</u>						
Respite S5150 15 Minutes 3 603 \$1,025 \$342 \$2 201						<u>`</u>				
	Respite		S5150	15 Minutes	3	603	\$1,025	\$342	\$2	201

Northpointe Service Category	Revenue Code	HCPCS Code	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	1	1	\$556	\$556	\$556	1
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	0	0	\$0	\$0	\$0	
Health Services		S9446	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470	Encounter	. 0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	0	0	\$0	\$0	\$0	0
Reidential Room and Board		S9976	Days	0	0	\$0	\$0	\$0	0
Assessment		T1001	Encounter	94	96	\$25,008	\$266	\$261	1
Health Services	1.00	T1002	Up to 15 min	93	224	\$5,835	\$63	\$26	2
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016	15 minutes	403	8,000	\$534,000	\$1,325	\$67	20
Targeted Case Management		T1017	15 minutes	331	5,560	\$368,962	\$1,115	\$66	17
Nursing Home Mental Health Monitoring		T1017	15 minutes	13	167	\$11,082	\$852	\$66	13
Personal Care in Licensed Specialized Residential Setting		T1020	Days	27	4,859	\$50,142	\$1,857	\$10	180
Personal Care in Licensed Specialized Residential Setting		T1020	Days	2	228	\$7,740	\$3,870	\$34	114
Personal Care in Licensed Specialized Residential Setting		T1020	Days	1	302	\$37,671	\$37,671	\$125	302
Assessments		T1023	Encounter	336	425	\$83,725	\$249	\$197	1
Enhanced Medical Supplies or Pharmacy		T1999	Items	15	47	\$689	\$46	\$15	3
Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004		0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	6	7	\$3,677	\$613	\$525	1
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	16	184	\$34,967	\$2,185	\$190	12
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				17	0	\$44,014	\$2,589	\$0	0
Other				0	0	\$0	\$0	\$0	0
Total Population and Cost				1,060		\$5,329,142			

Oakland			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		Days	47	10,330	\$5,079,185	\$108,068	\$492	220
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		Days	661	9,369	\$4,207,056	\$6,365	\$449	14
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		Days	646	9,267	\$3,850,688	\$5,961	\$416	14
Inpatient Hospital Ancillary Services - Room and Board	0144		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320		# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450		# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636		# of units	0	0	\$0	\$0	\$0	0_
ECT Recovery Room	0710			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740		# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762		Hour	. 0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901		Encounter	14	399	\$44,774	\$3,198	\$112	29
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919		# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912		Days	75	781	\$79,918	\$1,066	\$102	10
Outpatient Partial Hospitalization	0913		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942		# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104	Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90782	Encounter	640	5,455	\$431,491	\$674	\$79	9
Medication Administration		90788	Encounter	0	00	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801	Encounter	5,326	7,001	\$2,151,617	\$404	\$307	1
Assessment-Psychiatric Assessment		90802	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804	Encounter 20-30 Min	770	2,361	\$178,185	\$231	\$75	3
Therapy-Individual Therapy		90805	Encounter 20-30 Min	1	1	\$85	\$85	\$85	1
Therapy-Individual Therapy		90806	Encounter 45-50 Min	1,271	6,806	\$776,769	\$611	\$114	5
Therapy-Individual Therapy		90807	Encounter 45-50 Min	.0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808	Encounter 75-80 Min	477	1,555	\$249,686	\$523	\$161	3
Therapy-Individual Therapy		90809	Encounter 75-80 Min	0	0	\$0	\$0	\$0_	0
Therapy-Individual Therapy		90810	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

Oakland			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	*	90828	Encounter 75-80 Min	0	0	<b>\$</b> 0	\$0	\$0	0
Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	29	38	\$6,304	\$217	\$166	1
Therapy-Family Therapy		90847	Encounter	110	283	\$48,252	\$439	\$171	3
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853	Encounter	538	6,698	\$205,361	\$382	\$31	12
Therapy-Group Therapy		90857	Encounter	178	1,265	\$31,170	\$175	\$25	7
Medication Review		90862	Encounter	5,551	19,296	\$2,473,554	\$446	\$128	3
Additional Codes-ECT Physician		90870	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887	Encounter	8	8	\$700	\$88	\$88	1
Speech & Language Therapy		92506	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96100	Hour	8	16	\$6,827	\$853	\$427	2
Assessments-Other	-	96105	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110	Encounter	5	8	\$900	\$180	\$113	2
Assessments-Other		96111	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115	Hour	0	0	\$0	\$0	\$0	0
Assessments-Testing		96117	Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003	Encounter	76	76	\$17,863	\$235	\$235	1
Occupational Therapy		97004	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150	Encounter	113	663	\$35,596	\$315	\$54	6
Occupational Therapy		97504	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	0		\$0	\$0	\$0	0
Occupational or Physical Therapy		97532	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535	15 Minutes	29	726	\$33,890	\$1,169	\$47	25
Occupational or Physical Therapy  Occupational or Physical Therapy		97537	15 Minutes	61	1,255	\$36,910	\$605	\$29	21
Occupational or Physical Therapy Occupational or Physical Therapy	<del></del> -	97542	15 Minutes	0	0	\$30,910	\$003	\$0	0
Occupational or Physical Therapy Occupational Therapy		97342	15 Minutes	0	0	\$0	\$0	\$0 \$0	0
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Oakland			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Occupational Therapy		97750	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802	15 Minutes	166	523	\$23,990	\$145	\$46	3
Assessment or Health Services		97803	15 Minutes	66	284	\$13,004	\$197	\$46	4
Health Services		97804	30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233	-	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238	30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252	Encounter	7	7	\$303	\$43	\$43	1
Additional Codes-Physician Services		99253	Encounter	29	36	\$2,087	\$72	\$58	1
Additional Codes-Physician Services		99254	Encounter	27	32	\$2,713	\$100	\$85	1
Additional Codes-Physician Services		99255	Encounter	2	2	\$234	\$117	\$117	1
Additional Codes-Physician Services		99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506	Encounter	20	156	\$11,283	\$564	\$72	8
Transportation		A0080	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120		0	0	\$0	\$0	\$0	0
Transportation		A0130		0	0	\$0	\$0	\$0	0
Transportation		A0140		0	0	\$0	\$0	\$0	0
Transportation		A0170		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425	Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427	Refer to Code Descriptions	924	1,102	\$46,416	\$50	\$42	1
Additional codes - Transportation		A0428		0	0	\$0	\$0	\$0	0

Fiscal Year 2004-2005

Oakland			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		254	2,896	\$706,315	\$2,781	\$244	11
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings	<del></del> ;	D0274		0	0	\$0	\$0	\$0	
Prophylaxis Adult		D1110		0	0	\$0	\$0	\$0	-0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		0	0		\$0	\$0	
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	- 0	\$0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		- 0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920		0	0	\$0	\$0 \$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	7	17	\$3,141	\$449	\$185	2
Medication administration		G0351		0	0	\$0	\$0	\$103	0
Assessment		H0002	Encounter	3,031	4,511	\$1,007,803	\$332	\$223	1
Crisis Residential Services		H0018	Days	396	4,942	\$1,329,991	\$3,359	\$223 \$269	12
Prevention Services - Direct Model		H0025	Face to Face Contact	0	0	\$1,329,991	\$3,339	\$209	0
Assessment		H0031	Encounter	1,692	2,217	\$315,945	\$187	\$143	1
Treatment Planning		H0032	Encounter	1,609	2,264	\$343,788	\$214	\$152	1
Health Services		H0034	15 Minutes	8	19	\$1,426	\$178	\$75	2
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	411	7,581	\$221,896	\$540	\$29	18
Peer Directed and Operated Support Services		NA		0	0	\$714,384	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	637	89,482	\$5,222,170	\$8,198	\$58	140
Community Living Supports in Independent living/own home		H0043	Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000	Encounter	25	40	\$4,938	\$198	\$123	2
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	\$0	\$100	\$123	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	1,987	6,601	\$864,335	\$435	\$131	3
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	1,131	352,177	\$2,169,492	\$1,918	\$6	311
Community Living Supports (15 Minutes)		H2015	15 Minutes	349	2,765,478	\$10,453,507	\$29,953	\$4	7,924
Community Living Supports (Daily)		H2016	Per Diem	47	8,838	\$486,885	\$10,359	\$55	188
Community Living Supports (Daily)	<u></u>	H2016	Per Diem	62	13,967	\$1,284,405	\$20,716	\$92	225
Community Living Supports (Daily)		H2016	Per Diem	212	44,555	\$6,346,414	\$29,936	\$142	210
Behavior Services		H2019	15 Minutes	0	0	\$0,340,414	\$29,930	\$142	0
Supported Employment Services		H2023	15 minutes	20	30,950	\$124,110	\$6,206	\$0 \$4	1,548
Mental Health Therapy		H2027	15 Minutes	0	30,930	\$124,110	\$0,200	\$0	1,348
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	411	599,443	\$2,110,039	\$5,134	\$0 \$4	1,458
Medication Review		M0064	Encounter Face-to-Face	2,267	7,291	\$682,292	\$301	\$4 \$94	
Transportation	<u> </u>	S0209	Per Mile	2,207	7,291	\$682,292	\$301	\$94 \$0	3
Transportation		S0215	Per Mile	0	0	\$0	\$0 \$0	\$0 \$0	0
Family Training		S5110	15 Minutes	0	0	\$0	\$0	\$0	0
Family Training	.,	S5110	Encounter	105	310	\$58,590	\$558		
Foster Care		S5140	Days	0	310	\$58,590 \$0		\$189 \$0	3
Foster Care		S5145	Days	0	0	\$0 \$0	\$0	· · · · · · · · · · · · · · · · · · ·	0
Respite		S5150	15 Minutes	1	1,310		\$0	\$0	0
		22120	15 Milliones	1	1,310	\$878	\$878	\$1	1,310

Oakland			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	570	1,991	\$118,604	\$208	\$60	3
Health Services		S9446	Encounter	134	1,302	\$78,758	\$588	\$60	10
Health Services		S9470	Encounter	182	621	\$62,889	\$346	\$101	3
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	0	0	\$0	\$0	\$0	0
Reidential Room and Board		S9976	Days	396	4,942	\$104,721	\$264	\$21	12
Assessment		T1001	Encounter	470	539	\$108,641	\$231	\$202	1
Health Services	-	T1002	Up to 15 min	953	5,467	\$391,711	\$411	\$72	6
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	1	864	\$1,788	\$1,788	\$2	864
Supports Coordination/Wrap Facilitation		T1016	15 minutes	4	130	\$15,677	\$3,919	\$121	33
Targeted Case Management		T1017	15 minutes	5,616	198,308	\$13,082,379	\$2,329	\$66	35
Nursing Home Mental Health Monitoring		T1017	15 minutes	341	5,703	\$321,991	\$944	\$56	17
Personal Care in Licensed Specialized Residential Setting		T1020	Days	212	45,156	\$1,435,509	\$6,771	\$32	213
Personal Care in Licensed Specialized Residential Setting		T1020	Days	62	14,028	\$1,021,800	\$16,481	\$73	226
Personal Care in Licensed Specialized Residential Setting		T1020	Days	31	8,129	\$828,833	\$26,737	\$102	262
Assessments		T1023	Encounter	1,894	3,643	\$1,036,288	\$547	\$284	2
Enhanced Medical Supplies or Pharmacy		T1999	Items	0	0	\$0	\$0	\$0	0
Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004		0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	473	481	\$386,833	\$818	\$804	1
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	706	2,884	\$1,297,713	\$1,838	\$450	4
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				0	0	\$2,022,775	\$0	\$0	0
Other		_		0	0	\$0	\$0	\$0	0
Total Population and Cost				9,642		\$76,816,465			

Ottawa			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		Days	12	1,233	\$438,377	\$36,531	\$356	103
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		Days	1	36	\$6,686	\$6,686	\$186	36
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		Days	142	1,379	\$861,233	\$6,065	\$625	10
Inpatient Hospital Ancillary Services - Room and Board	0144		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320		# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450		# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636		# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740		# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762		Hour	0	7	\$0	\$0	\$0 \$283	7
Additional Codes-ECT Facility Charge	0901		Encounter	1		\$1,981 \$0	\$1,981	\$283 \$0	
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919		# of visits	0	0		\$0		
Outpatient Partial Hospitalization	0912		Days	5	13	\$3,513	\$703	\$270	3_
Outpatient Partial Hospitalization	0913		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942		# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104	Minutes	1	660	\$1,089	\$1,089	\$2 \$7	660
Medication Administration		90782	Encounter	0	0	\$211	\$70 \$0	\$0	0
Medication Administration		90788	Encounter	358	359	\$0	\$437	\$436	1
Assessment-Psychiatric Assessment		90801	Encounter	0	339	\$156,609 \$0	\$437	\$430 \$0	0
Assessment-Psychiatric Assessment		90802	Encounter Encounter 20-30 Min	366	990	\$56,239	\$154	\$57	3
Therapy-Individual Therapy		90805	Encounter 20-30 Min	0	990	\$30,239	\$134	\$0	0
Therapy-Individual Therapy		90806	Encounter 45-50 Min	652	4,483	\$467,701	\$717	\$104	7
Therapy-Individual Therapy Therapy-Individual Therapy		90807	Encounter 45-50 Min	0	0	\$407,701	\$0	\$104	0
		90808	Encounter 75-80 Min	5	6	\$272	\$54	\$45	1
Therapy-Individual Therapy Therapy-Individual Therapy		90809	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy Therapy-Individual Therapy		90810	Encounter 73-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy Therapy-Individual Therapy		90811	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy Therapy-Individual Therapy		90812	Encounter 45-50 Min		0	\$0	\$0	\$0	0
Therapy-Individual Therapy Therapy-Individual Therapy	•	90812	Encounter 45-50 Min		0	\$0	\$0	\$0	0
Therapy-Individual Therapy  Therapy-Individual Therapy		90813	Encounter 75-80 Min		0	\$0	\$0	\$0	0
		2014			· · · · · · · · · · · · · · · · · · ·		Ψ		

Ottawa			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	1.11111	90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	2	90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	23	53	\$6,129	\$266	\$116	2
Therapy-Family Therapy		90847	Encounter	82	560	\$57,842	\$705	\$103	7
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853	Encounter	253	2,790	\$102,174	\$404	\$37	11
Therapy-Group Therapy		90857	Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862	Encounter	1,046	5,195	\$948,465	\$907	\$183	5
Additional Codes-ECT Physician		90870	Encounter	2	26	\$2,080	\$1,040	\$80	13
Assessments-Other		90887	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	<del></del> -	92526	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96100	Hour	7	55	\$5,316	\$759	\$97	8
Assessments-Other		96105	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115	Hour	0	0	\$0	\$0	\$0	0
Assessments-Testing		96117	Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140	15 Minutes		0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational of Physical Therapy		97535	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational of Physical Therapy		97537	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational of Physical Therapy		97542	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Incrapy		21103	10 1-Minted	· · · · · · · · · · · · · · · · · · ·		Ψ0			

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Ottawa			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Occupational Therapy		97750	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802	15 Minutes	0	0	\$0	\$0	\$0	-0
Assessment or Health Services		97803	15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804	30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		1	10	\$68	\$68	\$7	10
Additional Codes-Physician Services		99232		1	1	\$11	\$11	\$11	1
Additional Codes-Physician Services		99233		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238	30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272	Encounter	. 0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506	Encounter	00	0	\$0	\$0	\$0	0
Transportation		A0080	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110	Per one-way trip	. 0	0	\$0	\$0	\$0	0
Transportation		A0120		0	0	\$0	\$0	\$0	0
Transportation		A0130		0	0	\$0	\$0	\$0	0
Transportation		A0140		0	0	\$0	\$0	\$0	0
Transportation		A0170		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425	Per Mile		0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427	Refer to Code Descriptions	0	0	\$0	\$0	\$0	0
Additional codes - Transportation	-	A0428		0	0	\$0	\$0	. \$0	0

Ottawa			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings		D0274		0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	4	14	\$9,148	\$2,287	\$653	4
Medication administration		G0351		24	83	\$564	\$24	\$7	3
Assessment		H0002	Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018	Days	36	173	\$41,151	\$1,143	\$238	5
Prevention Services - Direct Model		H0025	Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031	Encounter	804	864	\$330,562	\$411	\$383	1
Treatment Planning		H0032	Encounter	616	1,074	\$143,712	\$233	\$134	2
Health Services		H0034	15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		0	0	\$70,500	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	109	7,777	\$723,443	\$6,637	\$93	71
Community Living Supports in Independent living/own home		H0043	Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000	Encounter	2	6	\$185	\$93	\$31	3
Comprehensive Medication Services - EBP only	*****	H2010	15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	557	3,124	\$452,370	\$812	\$145	6
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	1	2,000	\$5,483	\$5,483	\$3	2,000
Community Living Supports (15 Minutes)		H2015	15 Minutes	67	17,264	\$118,325	\$1,766	\$7	258
Community Living Supports (Daily)		H2016	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	Per Diem	105	5,537	\$1,311,647	\$12,492	\$237	53
Behavior Services		H2019	15 Minutes	0	0,557	\$1,511,047	\$0	\$0	0
Supported Employment Services		H2023	15 minutes	19	2,390	\$13,982	\$736	\$6	126
Mental Health Therapy		H2027	15 Minutes	0	2,390	\$13,982	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	149	221,776	\$547,022	\$3,671	\$2	1,488
Medication Review		M0064	Encounter Face-to-Face	0	0	\$0	\$0	\$0	
Transportation		S0209	Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0209 S0215	Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110	15 Minutes	0	0	\$0	\$0	\$0	0
Family Training Family Training		S5110 S5111	Encounter	1	1	\$148	\$148	\$148	1
Foster Care		S5111	Days	0	0	\$148	\$148	\$148	0
Foster Care		S5140 S5145	Days	0	0	\$0	\$0	\$0	0
Respite		S5145 S5150	15 Minutes	0	0	\$0 \$0	\$0	\$0	0
Respite		33130	13 Minutes	U	U	20	20	20	

CMHSP Cost Data by Service Category

Ottawa			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470	Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	0	0	\$0	\$0	\$0	0
Reidential Room and Board		S9976	Days	0	0	\$0	\$0	\$0	0
Assessment		T1001	Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016	15 minutes	10	118	\$26,178	\$2,618	\$222	12
Targeted Case Management		T1017	15 minutes	344	8,448	\$751,534	\$2,185	\$89	25
Nursing Home Mental Health Monitoring		T1017	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	Days	1	339	\$5,730	\$5,730	\$17	339
Personal Care in Licensed Specialized Residential Setting		T1020	Days	7	1,693	\$68,728	\$9,818	\$41	242
Personal Care in Licensed Specialized Residential Setting		T1020	Days	3	331	\$28,307	\$9,436	\$86	110
Assessments		T1023	Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999	Items	0	0	\$0	\$0	\$0	0
Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004		0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	107	115	\$121,400	\$1,135	\$1,056	1
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	82	442	\$358,867	\$4,376	\$812	. 5
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				37	0	\$117,404	\$3,173	\$0	0
Other				125	0	\$126,925	\$1,015	\$0	0
Total Population and Cost				1,925		\$8,489,311			

Pathways			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		Days	3	424	\$154,336	\$51,445	\$364	141
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		Days	193	1,574	\$1,155,898	\$5,989	\$734	8
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320		# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450		# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636		# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740		# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762		Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901		Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919		# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912		Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925		# of tests	,o	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942		# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104	Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90782	Encounter	52	585	\$11,326	\$218	\$19	11
Medication Administration		90788	Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801	Encounter	143	151	\$80,646	\$564	\$534	1
Assessment-Psychiatric Assessment		90802	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804	Encounter 20-30 Min	3	3	\$380	\$127	\$127	1
Therapy-Individual Therapy		90805	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806	Encounter 45-50 Min	359	2,727	\$499,041	\$1,390	\$183	8
Therapy-Individual Therapy		90807	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

Pathways		Monog o 1	Unit		Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Service Category	Revenue Code	HCPCS Code	Measure	Cases					
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818	Encounter 45-50 Min	. 0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847	Encounter	13	33	\$5,467	\$421	\$166	3
Therapy-Family Therapy		90849	Encounter	14	84	\$14,099	\$1,007	\$168	6
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853	Encounter	61	452	\$30,325	\$497	\$67	7
Therapy-Group Therapy		90857	Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862	Encounter	595	2,979	\$779,694	\$1,310	\$262	5
Additional Codes-ECT Physician		90870	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506	Encounter	2	2	\$1,003	\$502	\$502	I
Speech & Language Therapy		92507	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	-	92526	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing	* *	96100	Hour	11	19	\$5,272	\$479	\$285	2
Assessments-Other		96105	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115	Hour	0	0	\$0	\$0	\$0	0
Assessments-Testing  Assessments-Testing		96117	Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002	Encounter	0	0	\$0	\$0	\$0	0
· · · · · · · · · · · · · · · · · · ·		97002	Encounter	3	3	\$4,020	\$1,340	\$1,340	1
Occupational Therapy		97003	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97110	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy				0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113	15 Minutes	0	0	\$0	\$0 \$0	\$0	0
Occupational or Physical Therapy		97116	15 Minutes			\$0	\$0 \$0	\$0	0
Occupational or Physical Therapy		97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140	15 Minutes	0	0				
Occupational or Physical Therapy		97150	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532	15 Minutes	1	6	\$970	\$970	\$162	6
Occupational or Physical Therapy		97533	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703	15 Minutes	0	0	\$0	\$0	\$0	0

Pathways			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Occupational Therapy		97750	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802	15 Minutes	4	52	\$4,213	\$1,053	\$81	13
Assessment or Health Services		97803	15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804	30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		64	79	\$6,238	\$97	\$79	1
Additional Codes-Physician Services		99222		53	58	\$3,582	\$68	\$62	1
Additional Codes-Physician Services		99223		3	3	\$180	\$60	<b>\$</b> 60	1
Additional Codes-Physician Services		99231		85	444	\$35,982	\$423	\$81	5
Additional Codes-Physician Services		99232	-	41	81	\$6,415	\$156	\$79	2
Additional Codes-Physician Services		99233		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238	30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	·	99251	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506	Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120		0	0	\$0	\$0	\$0	0
Transportation		A0130		0	0	\$0	\$0	\$0	. 0
Transportation		A0140		0	0	\$0	\$0	\$0	0
Transportation		A0170		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425	Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427	Refer to Code Descriptions	0	0	\$0	\$0	\$0	0
Additional codes - Transportation	****	A0428		0	0	\$0	\$0	\$0	0

Pathways									Ü
Service Category	Revenue Code	HCPCS Code	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220	Discounter.	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings		D0274		0	0	\$0	\$0	\$0	0
Prophylaxis Adult	•	D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	- 0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	6	13	\$1,488	\$248	\$114	2
Medication administration		G0351		0	0	\$0	\$0	\$0	0
Assessment		H0002	Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018	Days	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025	Face to Face Contact	31	148	\$19,647	\$634	\$133	5
Assessment		H0031	Encounter	652	737	\$169,790	\$260	\$230	1
Treatment Planning		H0032	Encounter	300	355	\$123,980	\$413	\$349	1
Health Services		H0034	15 Minutes	143	833	\$86,949	\$608	\$104	6
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	137	34,679	\$290,263	\$2,119	\$8	253
Peer Directed and Operated Support Services		NA		0	0	\$10,913	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	97	25,840	\$782,694	\$8,069	\$30	266
Community Living Supports in Independent living/own home		H0043	Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000	Encounter	8	17	\$5,740	\$717	\$338	2
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	1,184	12,710	\$715,700	\$604	\$56	11
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	95	25,009	\$208,825	\$2,198	\$8	263
Community Living Supports (15 Minutes)		H2015	15 Minutes	229	17,878	\$90,641	\$396	\$5	78
Community Living Supports (Daily)		H2016	Per Diem	5	1,122	\$38,204	\$7,641	\$34	224
Community Living Supports (Daily)		H2016	Per Diem	5	1,082	\$59,835	\$11,967	\$55	216
Community Living Supports (Daily)		H2016	Per Diem	45	7,237	\$1,279,212	\$28,427	\$177	161
Behavior Services		H2019	15 Minutes	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023	15 minutes	113	56,470	\$389,643	\$3,448	\$7	500
Mental Health Therapy		H2027	15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	0	0	\$0	\$0	\$0	0
Medication Review		M0064	Encounter Face-to-Face	48	105	\$15,577	\$325	\$148	2
Transportation		S0209	Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215	Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110	15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111	Encounter	4	20	\$1,314	\$329	\$66	5
Foster Care		S5140	Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145	Days	0	0	\$0	\$0	\$0	0
Respite		S5150	15 Minutes	0	0	\$0	\$0	\$0	0

Pathways			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite		\$5151	Per Diem	00	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446	Encounter	1	1	\$258	\$258	\$258	1
Health Services		S9470	Encounter	20	113	\$40,647	\$2,032	\$360	6
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	0	0	\$0	\$0	\$0	0
Reidential Room and Board		S9976	Days	0	0	\$0	\$0	\$0	0
Assessment		T1001	Encounter	44	44	\$15,129	\$344	\$344	1
Health Services		T1002	Up to 15 min	19	56	\$7,302	\$384	\$130	3
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016	15 minutes	104	1,062	\$103,237	\$993	\$97	10
Targeted Case Management		T1017	15 minutes	589	24,527	\$1,495,411	\$2,539	\$61	42
Nursing Home Mental Health Monitoring		T1017	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	Days	37	5,936	\$89,277	\$2,413	\$15	160
Personal Care in Licensed Specialized Residential Setting		T1020	Days	6	288	\$16,102	\$2,684	\$56	48
Personal Care in Licensed Specialized Residential Setting		T1020	Days	1	92	\$9,577	\$9,577	\$104	92
Assessments		T1023	Encounter	685	986	\$162,513	\$237	\$165	1
Enhanced Medical Supplies or Pharmacy		T1999	Items	27	234	\$12,035	\$446	\$51	9
Transportation		T2001	<u> </u>	0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004		0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				0	0	\$0	\$0	\$0	0
Other				O	0	\$0	\$0	\$0	0
Total Population and Cost				2,175		\$9,040,990			

Pines			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		Days	64	393	\$203,068	\$3,173	\$517	6
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		Days	2	7	\$4,535	\$2,268	\$648	4
Inpatient Hospital Ancillary Services - Room and Board	0144		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320		# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450		# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460		# of tests	0	0	\$0	\$0	\$0	. 0
Inpatient Hospital Ancillary Services - Audiology	0470-0472		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636		# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740		# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762		Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901		Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919		# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912		Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942		# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104	Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90782	Encounter	27	287	\$11,332	\$420	\$39	11
Medication Administration		90788	Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801	Encounter	335	404	\$104,232	\$311	\$258	1
Assessment-Psychiatric Assessment		90802	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804	Encounter 20-30 Min	340	375	\$23,620	\$69	\$63	1
Therapy-Individual Therapy		90805	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806	Encounter 45-50 Min	547	2,843	\$338,385	\$619	\$119	5
Therapy-Individual Therapy		90807	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

Pines			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847	Encounter	28	64	\$8,620	\$308	\$135	2
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853	Encounter	105	1,428	\$80,040	\$762	\$56	14
Therapy-Group Therapy		90857	Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862	Encounter	445	1,359	\$119,195	\$268	\$88	3
Additional Codes-ECT Physician		90870	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96100	Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115	Hour	0	0	\$0	\$0	\$0	0
Assessments-Testing		96117	Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113	15 Minutes	0	. 0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703	15 Minutes	0	0	\$0	\$0	\$0	0

Pines			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Occupational Therapy		97750	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755	15 Minutes	0	0	<b>\$</b> 0	\$0	\$0	0
Assessment or Health Services		97802	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803	15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804	30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		3	3	\$210	\$70	\$70	1
Additional Codes-Physician Services		99223		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		2	3	\$60	\$30	\$20	2
Additional Codes-Physician Services		99232		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		1	1	\$20	\$20	\$20	1
Additional Codes-Physician Services		99238	30 Minutes or less	3	3	\$90	\$30	\$30	1
Additional Codes-Physician Services		99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506	Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080	Per mile	0	0	\$0	\$0	\$0	0
Transportation	,	A0090	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120		0	0	\$0	\$0	\$0	0
Transportation		A0130		0	0	\$0	\$0	\$0	0
Transportation	,	A0140		0	0	\$0	\$0	\$0	0
Transportation		A0170		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425	Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427	Refer to Code Descriptions	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428		0	0	\$0	\$0	\$0	0

Pines			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings		D0274		0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant	·	D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351		0	0	\$0	\$0	\$0	0
Assessment		H0002	Encounter	664	688	\$54,730	\$82	\$80	1
Crisis Residential Services		H0018	Days	1	6	\$1,500	\$1,500	\$250	6
Prevention Services - Direct Model		H0025	Face to Face Contact	1	4	\$20	\$20	\$5	4
Assessment		H0031	Encounter	404	426	\$55,250	\$137	\$130	1
Treatment Planning		H0032	Encounter	468	508	\$28,560	\$61	\$56	1
Health Services		H0034	15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		0	0	\$48,776	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	51	11,184	\$320,207	\$6,279	\$29	219
Community Living Supports in Independent living/own home		H0043	Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	<b>\$</b> 0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	139	644	\$19,320	\$139	\$30	5
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	2	3,850	\$556	\$278	\$0	1,925
Community Living Supports (15 Minutes)		H2015	15 Minutes	3	11,573	\$25,725	\$8,575	\$2	3,858
Community Living Supports (Daily)		H2016	Per Diem	2	615	\$22,278	\$11,139	\$36	308
Community Living Supports (Daily)		H2016	Per Diem	3	349	\$20,294	\$6,765	\$58	116
Community Living Supports (Daily)		H2016	Per Diem	2	345	\$61,517	\$30,759	\$178	173
Behavior Services		H2019	15 Minutes	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023	15 minutes	19	1,318	\$20,070	\$1,056	\$15	69
Mental Health Therapy		H2027	15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	33	68,021	\$145,184	\$4,400	\$2	2,061
Medication Review		M0064	Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209	Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215	Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110	15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111	Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140	Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145	Days	0	0	\$0	\$0	\$0	0
Respite		S5150	15 Minutes	0	0	\$0	\$0	\$0	0

Pines			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470	Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	96	598	\$16,985	\$177	\$28	6
Reidential Room and Board		S9976	Days	0	0	\$0	\$0	\$0	0
Assessment		T1001	Encounter	31	32	\$4,284	\$138	\$134	1
Health Services		T1002	Up to 15 min	30	0	\$0	\$0	\$0	0
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	29	26,600	\$90,652	\$3,126	\$3	917
Supports Coordination/Wrap Facilitation		T1016	15 minutes	30	547	\$24,406	\$814	\$45	18
Targeted Case Management		T1017	15 minutes	165	10,466	\$360,112	\$2,182	\$34	63
Nursing Home Mental Health Monitoring		T1017	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	Days	6	1,297	\$12,538	\$2,090	\$10	216
Personal Care in Licensed Specialized Residential Setting		T1020	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	Days	1	12	\$810	\$810	\$68	12
Assessments		T1023	Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999	Items	0	0	\$0	\$0	\$0	0
Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004		0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				0	0	\$0	\$0	\$0	0
Other				0	0	\$0	\$0	\$0	0
Total Population and Cost				1,290		\$2,227,181			

Saginaw			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		Days	62	9,659	\$3,955,447	\$63,798	\$410	156
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		Days	24	787	\$401,173	\$16,716	<b>\$</b> 510	33
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		Days	472	3,969	\$2,630,973	\$5,574	\$663	8
Inpatient Hospital Ancillary Services - Room and Board	0144		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307		# of tests	49	115	\$0	\$0	\$0	2
Inpatient Hospital Ancillary Services - Radiology	0320		# of tests	5	5	\$0	\$0	\$0	1
ECT Anesthesia	0370			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434		# of treatments	0	0	\$0	\$0	<b>\$</b> 0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450		# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636		# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			0	0	\$0	\$0	\$0	0_
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740		# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762		Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901		Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919		# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912		Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942		# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia  Medication Administration		00104	Minutes	0	0	\$0	\$0	\$0	0_
Medication Administration		90782	Encounter	197	1,940	\$73,216	\$372	\$38	10
Assessment-Psychiatric Assessment		90/88	Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801	Encounter Encounter	569	767	\$134,180	\$236	\$175	1
Therapy-Individual Therapy		90802	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy  Therapy-Individual Therapy		90804	Encounter 20-30 Min Encounter 20-30 Min		112	\$8,723	\$168	\$78	2
Therapy-Individual Therapy  Therapy-Individual Therapy		90806	Encounter 45-50 Min	691	2 7.162	\$152	\$76 \$957	\$76	1
Therapy-Individual Therapy  Therapy-Individual Therapy		90807	Encounter 45-50 Min	2	7,162	\$661,320 \$250	\$125	\$92 \$125	10
Therapy-Individual Therapy		90808	Encounter 75-80 Min	27	95	\$13,147	\$125 \$487	\$125	1 4
Therapy-Individual Therapy	****	90809	Encounter 75-80 Min	0	93	\$13,147	\$0	\$138	
Therapy-Individual Therapy		90810	Encounter 20-30 Min	0	0	\$0	\$0 \$0	\$0 \$0	0
Therapy-Individual Therapy		90811	Encounter 20-30 Min	0	0	\$0 \$0	\$0	\$0 \$0	
Therapy-Individual Therapy  Therapy-Individual Therapy		90812	Encounter 45-50 Min	2	27	\$0 \$3,472			0
Therapy-Individual Therapy		90813	Encounter 45-50 Min		0	\$3,472	\$1,736 \$0	\$129 \$0	0
Therapy-Individual Therapy		90814	Encounter 75-80 Min	2	4	\$814	\$407	\$0 \$204	2
T.V.		70014	Encounter 73-00 (VIII)		4	3014	340/	3204	Z

Saginaw			Unit		/		010	0	** :- (0
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816	Encounter 20-30 Min	2	3	\$228	\$114	\$76	2
Therapy-Individual Therapy		90817	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	-	90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	3	3	\$300	\$100	\$100	11
Therapy-Family Therapy		90847	Encounter	12	29	\$3,404	\$284	\$117	2
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853	Encounter	13	83	\$3,828	\$294	\$46	6
Therapy-Group Therapy		90857	Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862	Encounter	1,215	4,316	\$451,347	\$371	\$105	4
Additional Codes-ECT Physician		90870	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96100	Hour	39	84	\$13,636	\$350	\$162	2
Assessments-Other		96105	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115	Hour	0	0	\$0	\$0	\$0	0
Assessments-Testing		96117	Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002	Encounter	2	2	\$273	\$137	\$137	1
Occupational Therapy		97003	Encounter	2	2	\$307	\$154	\$154	1_
Occupational Therapy		97004	Encounter	7	7	\$944	\$135	\$135	1
Occupational or Physical Therapy		97110	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Thorapy									

Michigan Department of Community Health

Saginaw			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Occupational Therapy		97750	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802	15 Minutes	3	12	\$788	\$263	\$66	4
Assessment or Health Services		97803	15 Minutes	3	19	\$695	\$232	\$37	6
Health Services		97804	30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211	Encounter	0	0	\$0	\$0	\$0	0_
Additional Codes-Physician Services		99212	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238	30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	-	99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506	Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100	Per one-way trip	382	800	\$4,758	\$12	\$6	2
Transportation		A0110	Per one-way trip	2	310	\$2,425	\$1,213	\$8	155
Transportation		A0120		0	0	\$0	\$0	\$0	0
Transportation		A0130		0	0	\$0	\$0	\$0	0
Transportation		A0140		0	0	\$0	\$0	\$0	0
Transportation		A0170		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425	Per Mile	7	325	\$1,934	\$276	\$6	46
Additional Codes-Transportation		A0427	Refer to Code Descriptions	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428	• •	0	0	\$0	\$0	\$0	0
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Saginaw			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings		D0274		0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351		141	952	\$68,428	\$485	\$72	7
Assessment		H0002	Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018	Days	210	991	\$385,845	\$1,837	\$389	5
Prevention Services - Direct Model		H0025	Face to Face Contact	1	1	\$87	\$87	\$87	1
Assessment		H0031	Encounter	541	679	\$116,058	\$215	\$171	1
Treatment Planning		H0032	Encounter	72	292	\$33,273	\$462	\$114	4
Health Services		H0034	15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	92	14,956	\$523,816	\$5,694	\$35	163
Community Living Supports in Independent living/own home		H0043	Per diem	2	224	\$17,100	\$8,550	\$76	112
Respite		H0045	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000	Encounter	25	43	\$5,262	\$210	\$122	2
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	1,384	9,827	\$671,814	\$485	\$68	7
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	3	5,672	\$22,121	\$7,374	\$4	1,891
Community Living Supports (15 Minutes)		H2015	15 Minutes	36	251,397	\$932,232	\$25,895	\$4	6,983
Community Living Supports (Daily)		H2016	Per Diem	29	5,879	\$182,249	\$6,284	\$31	203
Community Living Supports (Daily)		H2016	Per Diem	25	2,313	\$143,406	\$5,736	\$62	93
Community Living Supports (Daily)		H2016	Per Diem	103	23,300	\$2,964,960	\$28,786	\$127	226
Behavior Services		H2019	15 Minutes	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023	15 minutes	2	7,612	\$30,314	\$15,157	\$4	3,806
Mental Health Therapy		H2027	15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	87	18,020	\$273,094	\$3,139	\$15	207
Medication Review		M0064	Encounter Face-to-Face	90	370	\$17,455	\$194	\$47	4
Transportation	***************************************	S0209	Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215	Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110	15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111	Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140	Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145	Days	0	0	\$0	\$0	\$0	0
Respite		S5150	15 Minutes	0	- 0	\$0	\$0	\$0	0

Saginaw			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	2	2	\$151	\$76	\$76	1
Health Services		S9446	Encounter	11	19	\$1,928	\$175	\$101	2
Health Services		S9470	Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	148	323	\$38,841	\$262	\$120	2
Reidential Room and Board		S9976	Days	0	0	\$0	\$0	\$0	0
Assessment		T1001	Encounter	71	81	\$13,778	\$194	\$170	1
Health Services		T1002	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016	15 minutes	21	433	\$27,429	\$1,306	\$63	21
Targeted Case Management		T1017	15 minutes	809	30,819	\$1,407,890	\$1,740	\$46	38
Nursing Home Mental Health Monitoring		T1017	15 minutes	28	928	\$52,455	\$1,873	\$57	33
Personal Care in Licensed Specialized Residential Setting		T1020	Days	110	19,431	\$320,262	\$2,911	\$16	177
Personal Care in Licensed Specialized Residential Setting		T1020	Days	20	2,093	\$72,250	\$3,613	\$35	105
Personal Care in Licensed Specialized Residential Setting		T1020	Days	85	10,845	\$727,915	\$8,564	\$67	128
Assessments		T1023	Encounter	1,140	1,644	\$249,779	\$219	\$152	1
Enhanced Medical Supplies or Pharmacy		T1999	Items	0	0	\$0	\$0	\$0	0
Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004		0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	572	2,326	\$353,571	\$618	\$152	4
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	159	718	\$16,119	\$101	\$22	5
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				369	0	\$550,383	\$1,492	\$0	0
Other				0	0	\$0	\$0	\$0	0
Total Population and Cost				3,229		\$18,587,999			

Sanilac			Unit				- 15		** ***
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		Days	4	40	\$11,103	\$2,776	\$278	10
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		Days	66	436	\$324,413	\$4,915	\$744	7
Inpatient Hospital Ancillary Services - Room and Board	0144		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320		# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444	<u> </u>	# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450		# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636		# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731		# of tests	0	00	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740		# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762		Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901		Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919		# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912		Days	1	4	\$642	\$642	\$161	4
Outpatient Partial Hospitalization	0913		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942		# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104 90782	Minutes	20	11	\$990	\$990	\$90 \$38	11
Medication Administration			Encounter		327	\$12,373	\$619		16
Medication Administration		90788	Encounter	0	. 0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801	Encounter	108	112	\$24,143	\$224	\$216 \$0	1
Assessment-Psychiatric Assessment		90802	Encounter	0	0	\$0	\$0	\$88	0
Therapy-Individual Therapy		90804	Encounter 20-30 Min Encounter 20-30 Min	21	25 0	\$2,208 \$0	\$105 \$0	\$88	0
Therapy-Individual Therapy		90805 90806	Encounter 20-30 Min Encounter 45-50 Min		1,572		\$987	\$137	7
Therapy-Individual Therapy Therapy-Individual Therapy		90807	Encounter 45-50 Min	219	0	\$216,149 \$0	\$987	\$137	
						\$3,529	\$588	\$271	
Therapy-Individual Therapy Therapy-Individual Therapy		90808	Encounter 75-80 Min Encounter 75-80 Min	6	0	\$3,529 \$0	\$588	\$271	2
Therapy-Individual Therapy Therapy-Individual Therapy		90809	Encounter 73-80 Min	0	0	\$0	\$0	\$0 \$0	0
Therapy-Individual Therapy Therapy-Individual Therapy		90810	Encounter 20-30 Min	0	0	\$0	\$0	\$0 \$0	0
Therapy-Individual Therapy Therapy-Individual Therapy		90811	Encounter 20-30 Min Encounter 45-50 Min	0	0	\$0 \$0	\$0 \$0	\$0 \$0	
Therapy-Individual Therapy  Therapy-Individual Therapy		90812	Encounter 45-50 Min	0	0	\$0 \$0	\$0 \$0	\$0 \$0	0
Therapy-Individual Therapy  Therapy-Individual Therapy		90813	Encounter 75-80 Min	0	0	\$0	\$0 \$0	\$0	0
And and Andrews And Andrews		70017	Discounter 75-60 Hill		V	<b>₽</b> U			

Sanilae			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	30	90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	·	90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	1	1	\$74	\$74	\$74	1
Therapy-Family Therapy		90847	Encounter	27	57	\$7,964	\$295	\$140	2
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853	Encounter	18	202	\$67,962	\$3,776	\$336	11
Therapy-Group Therapy		90857	Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862	Encounter	314	1,401	\$97,869	\$312	\$70	4
Additional Codes-ECT Physician		90870	Encounter	2	8	\$3,896	\$1,948	\$487	4
Assessments-Other		90887	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96100	Hour	5	13	\$1,698	\$340	\$131	3
Assessments-Other		96105	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115	Hour	0	0	\$0	\$0	\$0	0
Assessments-Testing		96117	Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003	Encounter	2	2	\$955	\$478	\$478	1
Occupational Therapy		97004	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542	15 Minutes	. 0	0	\$0	\$0	\$0	0
Occupational Therapy		97703	15 Minutes	0	0	\$0	\$0	\$0	0

Sanilac			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Occupational Therapy		97750	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803	15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804	30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	,	99201	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	•	99204	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233	<del>_</del>	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238	30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506	Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120		0	0	\$0	\$0	\$0	0
Transportation		A0130		0	0	\$0	\$0	\$0	0
Transportation		A0140		0	0	\$0	\$0	\$0	0
Transportation		A0170		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425	Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427	Refer to Code Descriptions	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428		0	0	\$0	\$0	\$0	0

Sanilac			Unit			_	0.40	0 (7)	TT '4/0
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings	·	D0274		0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351		0	0	\$0	\$0	\$0	0
Assessment		H0002	Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018	Days	22	279	\$66,049	\$3,002	\$237	13
Prevention Services - Direct Model		H0025	Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031	Encounter	259	272	\$106,415	\$411	\$391	1
Treatment Planning		H0032	Encounter	251	318	\$105,934	\$422	\$333	1
Health Services		H0034	15 Minutes	127	650	\$29,845	\$235	\$46	5
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		0	0	\$100,732	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	63	8,642	\$696,040	\$11,048	\$81	137
Community Living Supports in Independent living/own home		H0043	Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	83	653	\$65,124	\$785	\$100	8
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	11	2,925	\$18,363	\$1,669	\$6	266
Community Living Supports (15 Minutes)		H2015	15 Minutes	46	32,115	\$95,317	\$2,072	\$3	698
Community Living Supports (Daily)		H2016	Per Diem	10	1,661	\$37,764	\$3,776	\$23	166
Community Living Supports (Daily)		H2016	Per Diem	13	924	\$62,981	\$4,845	\$68	71
Community Living Supports (Daily)		H2016	Per Diem	9	2,000	\$227,423	\$25,269	\$114	222
Behavior Services		H2019	15 Minutes	0	0	\$0	\$23,209	\$0	0
Supported Employment Services		H2023	15 minutes	13	183	\$16,620	\$1,278	\$91	14
Mental Health Therapy		H2027	15 Minutes	0	0	\$10,020	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	19	20,751	\$96,520	\$5,080	\$5	1,092
Medication Review		M0064	Encounter Face-to-Face	0	20,731	\$90,320	\$5,080	\$0 \$0	1,092
Transportation		S0209	Per Mile	0	0	\$0 \$0	\$0	\$0	
Transportation		S0209	Per Mile	0	0	\$0	\$0 \$0	\$0 \$0	0
Family Training		S5110	15 Minutes	0	0	\$0	\$0 \$0	\$0 \$0	0
Family Training	<del></del> -	S5110 S5111	Encounter	1	U	\$0 \$51	\$0 \$51	\$0 \$51	
Foster Care		S5140	Days	0	0				1
Foster Care		S5140 S5145	Days	0		\$0	\$0	\$0	0
Respite	·	S5145 S5150	Days 15 Minutes		0	\$0	\$0	\$0	0
поэрис		93130	15 Minutes	0	0	\$0	\$0	\$0	0

Sanilac			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470	Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	0	0	\$0	\$0	\$0	0
Reidential Room and Board		S9976	Days	0	0	\$0	\$0	\$0	0
Assessment		T1001	Encounter	17	17	\$7,495	\$441	\$441	1
Health Services		T1002	Up to 15 min	369	1,998	\$70,698	\$192	\$35	5
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016	15 minutes	0	0	\$0	\$0	\$0	0
Targeted Case Management		T1017	15 minutes	292	8,306	\$698,204	\$2,391	\$84	28
Nursing Home Mental Health Monitoring		T1017	15 minutes	9	73	\$6,136	\$682	\$84	8
Personal Care in Licensed Specialized Residential Setting		T1020	Days	26	4,557	\$75,787	\$2,915	\$17	175
Personal Care in Licensed Specialized Residential Setting		T1020	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023	Encounter	37	42	\$18,257	\$493	\$435	1
Enhanced Medical Supplies or Pharmacy		T1999	Items	0	0	\$0	\$0	\$0	0
Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004		0	0	\$0	\$0	\$0_	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	3	5	\$37,671	\$12,557	\$7,534	2
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				0	0	\$14,964	\$0	\$0	0
Other		·		0	0	\$0	\$0	\$0	0
Total Population and Cost				534		\$3,430,358			

Therapy-Individual Therapy

Therapy-Individual Therapy

Therapy-Individual Therapy

Encounter 45-50 Min

Encounter 45-50 Min

Encounter 75-80 Min

0

0

0

0

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90812

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Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818	Encounter 45-50 Min	0	0	\$0	\$0	\$0	
Therapy-Individual Therapy		90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847	Encounter	2	10	\$754	\$377	\$75	5
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853	Encounter	8	69	\$3,235	\$404	\$47	9
Therapy-Group Therapy		90857	Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862	Encounter	334	1,178	\$63,286	\$189	\$54	4
Additional Codes-ECT Physician		90870	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96100	Hour	3	6	\$1,056	\$352	\$176	2
Assessments-Other		96105	Encounter	0	0	\$0	\$0	<b>\$</b> 0	0
Assessments-Other		96110	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115	Hour	0	0	\$0	\$0	\$0	0
Assessments-Testing		96117	Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703	15 Minutes	0	0	\$0	\$0	\$0	0

Shiawassee			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Occupational Therapy		97750	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803	15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804	30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222	•	3	3	\$70	\$23	\$23	1
Additional Codes-Physician Services		99223		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		8	61	\$1,149	\$144	\$19	8
Additional Codes-Physician Services		99232		6	14	\$280	\$47	\$20	2
Additional Codes-Physician Services		99233		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238	30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243	Encounter	0	0	\$0	\$0	\$0	00
Additional Codes-Physician Services		99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272	Encounter	0	0	\$0	\$0	\$0	0_
Additional Codes-Physician Services		99273	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506	Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120		0	0	\$0	\$0	\$0	0
Transportation		A0130		0	0	\$0	\$0	\$0	. 0
Transportation		A0140		0	0	\$0	\$0	\$0	0
Transportation		A0170	D 167	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425	Per Mile	0	0	\$0	\$0	\$0	
Additional Codes-Transportation		A0427	Refer to Code Descriptions	0	0	\$0	\$0	\$0 \$0	0
Additional codes - Transportation		A0428		0	0	\$0	\$0		

Shiawassee			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings		D0274	-	0	0	\$0	\$0	\$0	0
Prophylaxis Adult	·	D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392	· <del>-</del>	0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351		0	0	\$0	\$0	\$0	0
Assessment		H0002	Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018	Days	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025	Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031	Encounter	261	265	\$56,001	\$215	\$211	1
Treatment Planning		H0032	Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034	15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	44	2,474	\$12,910	\$293	\$5	56
Peer Directed and Operated Support Services		NA		0	0	\$12,659	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	47	5,159	\$368,038	\$7,831	\$71	110
Community Living Supports in Independent living/own home		H0043	Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000	Encounter	1	1	\$33	\$33	\$33	1
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	<b>\$</b> 0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	185	791	\$44,861	\$242	\$57	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	9	27,686	\$123,832	\$13,759	\$4	3,076
Community Living Supports (15 Minutes)		H2015	15 Minutes	3	65,113	\$239,660	\$79,887	\$4	21,704
Community Living Supports (Daily)		H2016	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	Per Diem	2	362	\$69,464	\$34,732	\$192	181
Behavior Services		H2019	15 Minutes	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023	15 minutes	24	13,295	\$84,482	\$3,520	\$6	554
Mental Health Therapy		H2027	15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	1	2	\$0	\$0	\$0	2
Medication Review		M0064	Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209	Per Mile	0	0	\$0	\$0	\$0	
Transportation		S0205	Per Mile	0	0	\$0	\$0	\$0	
Family Training		S5110	15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111	Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140	Days	1	31	\$6,870	\$6,870	\$222	31
Foster Care		S5145	Days	0	0	\$0,870	\$0,870	\$0	0
Respite		S5150	15 Minutes	0	0	\$0	\$0	\$0	0
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Shiawassee			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470	Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	1	8	\$104	\$104	\$13	8
Reidential Room and Board		S9976	Days	0	0	\$0	\$0	\$0	0
Assessment		T1001	Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002	Up to 15 min	2	4	\$102	\$51	\$26	2
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	7	1,144	\$4,272	\$610	\$4	163
Supports Coordination/Wrap Facilitation		T1016	15 minutes	6	67	\$4,914	\$819	\$73	11
Targeted Case Management		T1017	15 minutes	172	5,487	\$349,276	\$2,031	\$64	32
Nursing Home Mental Health Monitoring		T1017	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	Days	2	363	\$9,003	\$4,502	\$25	182
Personal Care in Licensed Specialized Residential Setting		T1020	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023	Encounter	91	155	\$35,346	\$388	\$228	2
Enhanced Medical Supplies or Pharmacy		T1999	Items	1	12	\$1,975	\$1,975	\$165	12
Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	7	1,369	\$8,976	\$1,282	\$7	196
Transportation		T2004		0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	0	0	\$13,729	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				9	0	\$446	\$50	\$0	0
Other				0	0	\$0	\$0	\$0	0
Total Population and Cost				704		\$2,472,228			

Page	St. Clair			Unit						
Seal Mental Researcionin Turling   Ingester (CFMSD)   1967   1968   1968   1969   19	Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Control Psychiatric Disposition DPTSS	State Psychiatric Hospital - Inpatient PT22			Days	8	1,432	\$659,550	\$82,444	\$461	179
Page	State Mental Retardation Facility - Inpatient (ICF/MR) PT65			Days	0	0	\$0	\$0	\$0	0
Page	Local Psychiatric Hospital/IMD PT68			Days	55	570	\$235,989	\$4,291	\$414	10
Experiment Hospital Ancelling Services - Farmers	Local Psychiatric Hospital - Acute Community PT73			Days	387	2,218	\$1,184,182	\$3,060	\$534	6
Papeline Hospital Acadillary Services - Plazerangy   6254-62544 (1975)   970-6272   97	Inpatient Hospital Ancillary Services - Room and Board	0144		Days	0	0	\$0	\$0	\$0	0
Pages   Page	Inpatient Hospital Ancillary Services - Leave of Absence	0183		Days	0	0	\$0	\$0	\$0	0
Paper Hast Report Auchillery Services - Reporting Services - Report Services - Rep	Inpatient Hospital Ancillary Services - Pharmacy				0	0	\$0	\$0	\$0	0
Paper   Pape	Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		# of items	0	0	\$0	\$0	\$0	0
Part	Inpatient Hospital Ancillary Services - Laboratory			# of tests	0	0	\$0	\$0	\$0	0
Impation Hospital Auxillus Services Negeriaury Services   0410   # of resements   0   0   50   50   50   50   0   0   0	Inpatient Hospital Ancillary Services - Radiology	0320		# of tests	0	0	\$0	\$0	\$0	0
	ECT Anesthesia	0370			0	0	\$0	\$0	\$0	0
	Inpatient Hospital Ancillary Services - Respiratory Services	0410		# of treatments	0	0	\$0	\$0	\$0	0
Executed Hospital Ancillary Services - Expension   0400   600	Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		# of treatments	0	0	\$0	\$0	\$0	0
	Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434		# of treatments	0	0	\$0	\$0	\$0	0
	Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444		# of treatments	0	0	\$0	\$0	\$0	0
	Inpatient Hospital Ancillary Services - Emergency Room	0450		# of visits	0	0	\$0	\$0	\$0	0
Impatiter Haspital Ancillary Services - Magnetic Rosonance Technology (MRT)	Inpatient Hospital Ancillary Services - Pulmonary Function	0460		# of tests	0	0	\$0	\$0	\$0	0
	Inpatient Hospital Ancillary Services - Audiology	0470-0472		# of tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611		# of tests	0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - EKGGG	Inpatient Hospital Ancillary Services - Pharmacy	0636		# of units	0	0	\$0	\$0	\$0	0
Impation Mospital Ancillary Services - EEG	ECT Recovery Room	0710			0	0	\$0	\$0	\$0	0
Extended Observation Beds	Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes FCT Facility Charge   0901   Encounter   0   0   0   50   50   50   0   0     Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Service   0900, 0902-0904, # of visits   0   0   0   50   50   50   50     Outpatient Partial Hospitalization   0912   Days   39   229   \$47,50   \$1,244   \$32,09   6     Outpatient Partial Hospitalization   0913   Days   0   0   0   50   50   50   50     Inpatient Hospital Ancillary Services - Other Diagnosis Services   0925   # of tests   0   0   50   50   50   50   0     Inpatient Hospital Ancillary Services - Other Diagnosis Services   0940-0942   # of visits   0   0   50   50   50   50   0     Inpatient Hospital Ancillary Services - Other Diagnosis Services   0940-0942   # of visits   0   0   50   50   50   50   0     Medication Administration   90782   Encounter   53   722   \$27,894   \$526   \$39   14     Medication Administration   90788   Encounter   906   1,389   516,6461   \$184   \$120   2     Assessment-Psychiatric Assessment   98001   Encounter   906   1,389   \$16,6461   \$184   \$120   2     Assessment-Psychiatric Assessment   98002   Encounter   906   1,389   \$16,6461   \$184   \$120   2     Assessment-Psychiatric Assessment   98002   Encounter   906   1,389   \$16,6461   \$184   \$120   2     Assessment-Psychiatric Assessment   98002   Encounter   906   1,389   \$16,6461   \$184   \$120   2     Assessment-Psychiatric Assessment   98002   Encounter   906   1,389   \$16,6461   \$184   \$120   2     Assessment-Psychiatric Assessment   98002   Encounter   906   1,389   \$16,6461   \$184   \$120   2     Assessment-Psychiatric Assessment   98002   Encounter   906   1,389   \$16,6461   \$184   \$120   2     Assessment-Psychiatric Assessment   98002   Encounter   906   1,389   \$16,6461   \$184   \$120   2     Therapy-Individual Therapy   98006   Encounter   906   Encounter   906   \$160	Inpatient Hospital Ancillary Services - EEG	0740		# of tests	0	0	\$0	\$0	\$0	0
Paper   Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services   Oscillation	Extended Observation Beds	0762		Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization   O911	Additional Codes-ECT Facility Charge	0901		Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization   Op13	Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services			# of visits	0	0	\$0	\$0	\$0	0
Paper   Pape	Outpatient Partial Hospitalization	0912		Days	39	229	\$47,750	\$1,224	\$209	6
Impatient Hospital Ancillary Services - Other Therapeutic Services   0940-0942	Outpatient Partial Hospitalization	0913		Days	0	0	\$0	·		
Additional Codes-ECT Anesthesia   00104   Minutes   0   0   0   50   50   0   0   0   0	Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925		# of tests	0	0	\$0	\$0	\$0	0
Medication Administration   90782   Encounter   53   722   \$27,894   \$526   \$39   14     Medication Administration   90788   Encounter   0   0   0   \$0   \$0   \$0   \$0   \$0	Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942		# of visits	0	0	\$0	\$0	\$0	0
Medication Administration   90788   Encounter   0   0   0   0   \$0   \$0   \$0   \$0	Additional Codes-ECT Anesthesia		00104	Minutes	0	0	\$0	\$0	\$0	0
Medication Administration   90788   Encounter   0   0   5   5   5   0   0   0   5   5	Medication Administration		90782	Encounter	53	722	\$27,894	\$526	\$39	14
Assessment-Psychiatric Assessment   Spoking	The state of the s		90788	Encounter	0	0	\$0	\$0	\$0	0
Seessment-Psychiatric Assessment   90802   Encounter   3   4   \$345   \$115   \$86   1			90801	Encounter	906	1,389	\$166,461	\$184	\$120	2
Therapy-Individual Therapy   90805   Encounter 20-30 Min   1   1   1   559   559   559   1     Therapy-Individual Therapy   90806   Encounter 45-50 Min   856   8,290   \$865,255   \$1,011   \$104   10     Therapy-Individual Therapy   90807   Encounter 45-50 Min   856   8,290   \$865,255   \$1,011   \$104   10     Therapy-Individual Therapy   90807   Encounter 45-50 Min   0   0   0   0   0   0   0     Therapy-Individual Therapy   90808   Encounter 75-80 Min   55   116   \$20,455   \$372   \$176   2     Therapy-Individual Therapy   90809   Encounter 75-80 Min   0   0   0   0   0   0     Therapy-Individual Therapy   90809   Encounter 75-80 Min   0   0   0   0   0   0     Therapy-Individual Therapy   90810   Encounter 20-30 Min   0   0   0   0   0   0     Therapy-Individual Therapy   90811   Encounter 20-30 Min   0   0   0   0   0   0     Therapy-Individual Therapy   90812   Encounter 45-50 Min   2   3   3382   3191   3127   2     Therapy-Individual Therapy   90813   Encounter 45-50 Min   0   0   0   0   0   0   0     Therapy-Individual Therapy   90813   Encounter 45-50 Min   0   0   0   0   0   0   0     Therapy-Individual Therapy   90813   Encounter 45-50 Min   0   0   0   0   0   0   0     Therapy-Individual Therapy   90813   Encounter 45-50 Min   0   0   0   0   0   0   0   0     Therapy-Individual Therapy   90813   Encounter 45-50 Min   0   0   0   0   0   0   0   0   0     Therapy-Individual Therapy   90813   Encounter 45-50 Min   0   0   0   0   0   0   0   0   0			90802	Encounter	3	4	\$345	\$115	\$86	
Pherapy-Individual Therapy   9805   Encounter 20-30 Min   1   1   \$59   \$59   \$59   \$1   \$1   \$1   \$1   \$1   \$1   \$1   \$			90804	Encounter 20-30 Min	233	424	\$34,351	\$147	\$81	2
Therapy-Individual Therapy   90807   Encounter 45-50 Min   0   0   0   \$0   \$0   \$0   \$0   \$0			90805	Encounter 20-30 Min	1	1	\$59	\$59	\$59	
Pherapy-Individual Therapy   9887   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0			90806	Encounter 45-50 Min	856	8,290	\$865,255	\$1,011	\$104	10
Pherapy-Individual Therapy   9888   Encounter 75-80 Min   55   116   \$20,455   \$372   \$176   2     Pherapy-Individual Therapy   9889   Encounter 75-80 Min   0   0   0   \$0   \$0   \$0   \$0   0     Pherapy-Individual Therapy   9881   Encounter 20-30 Min   0   0   0   \$0   \$0   \$0   \$0   \$0			90807	Encounter 45-50 Min	0	0	\$0	\$0	\$0	
Therapy-Individual Therapy   9889   Encounter 75-80 Min   0   0   0   \$0   \$0   \$0   \$0   \$0			90808	Encounter 75-80 Min	55	116	\$20,455	\$372	\$176	
Therapy-Individual Therapy   9810   Encounter 20-30 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0			90809	Encounter 75-80 Min	0	0	\$0			
Therapy-Individual Therapy   9811   Encounter 20-30 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0			90810	Encounter 20-30 Min	0	0	\$0			
Therapy-Individual Therapy   90812   Encounter 45-50 Min   2   3   \$382   \$191   \$127   2			90811	Encounter 20-30 Min	0	0				
Therapy-Individual Therapy  90813 Encounter 45-50 Min 0 0 \$0 \$0 \$0 \$0 0  Therapy-Individual Therapy				Encounter 45-50 Min	2	3	\$382	\$191	\$127	
1nerapy-Individual Therapy 90814 Encounter 75-80 Min 0 0 \$0 \$0 \$0 \$0 \$0 \$0 \$0				Encounter 45-50 Min	0	0	\$0			
	i nerapy-individual Therapy		90814	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

St. Clair			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	1.10	90816	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	1	I	\$98	\$98	\$98	1
Therapy-Family Therapy		90847	Encounter	17	51	\$5,211	\$307	\$102	3
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853	Encounter	181	2,728	\$375,015	\$2,072	\$137	15
Therapy-Group Therapy		90857	Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862	Encounter	1,036	4,726	\$299,709	\$289	\$63	5
Additional Codes-ECT Physician		90870	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other	-	90887	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506	Encounter	I	1	\$182	\$182	\$182	1
Speech & Language Therapy		92507	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96100	Hour	2	3	\$652	\$326	\$217	2
Assessments-Other		96105	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115	Hour	0	0	\$0	\$0	\$0	0
Assessments-Testing		96117	Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003	Encounter	13	13	\$4,974	\$383	\$383	1
Occupational Therapy		97004	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	5	249	\$10,573	\$2,115	\$42	50
Occupational or Physical Therapy	· · · · · ·	97532	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537	15 Minutes	2	22	\$202	\$101	\$9	11
Occupational or Physical Therapy		97542	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703	15 Minutes	0	0	\$0	\$0	\$0	0
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St. Clair			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Occupational Therapy		97750	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803	15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804	30 Minutes	0	0	\$0	<b>\$</b> 0	\$0	0
Additional Codes-Physician Services		99201	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238	30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	***************************************	99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252	Encounter	0	0	\$0 \$0	\$0	\$0	0
Additional Codes-Physician Services		99253	Encounter	16	16	\$1,350	\$84	\$84	1
Additional Codes-Physician Services		99254	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271	Encounter	0	0	\$0 \$0	\$0	\$0	0
Additional Codes-Physician Services		99272	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		0	0		\$0	\$0	
Medication Administration	·	99506	Encounter Encounter	9	24	\$0 \$1,315			0
Transportation		A0080	Per mile	0	0		\$146	\$55	3
Transportation		A0090	Per mile	0		\$0	\$0	\$0	0
Transportation				0	0	\$0	\$0	\$0	0
Transportation	·	A0100	Per one-way trip		0	\$0	\$0	\$0	0
Transportation		A0110	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation	-	A0120		0	0	\$0	\$0	\$0	0
Transportation		A0130		0	0	\$0	\$0	\$0	0
Transportation		A0140		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0170	D 2 57	0	0	\$0	\$0	\$0	0
		A0425	Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427	Refer to Code Descriptions	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428		0	0	\$0	\$0	\$0	0

St. Clair			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings		D0274	1 0 100 0	0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110	***************************************	0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351		0	0	\$0	\$0	\$0	0
Assessment		H0002	Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018	Days	25	362	\$59,360	\$2,374	\$164	14
Prevention Services - Direct Model		H0025	Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031	Encounter	837	910	\$261,410	\$312	\$287	1
Treatment Planning		H0032	Encounter	444	646	\$179,849	\$405	\$278	1
Health Services		H0034	15 Minutes	391	1,787	\$76,597	\$196	\$43	5
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		70	0	\$121,117	\$1,730	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	73	13,362	\$593,084	\$8,124	\$44	183
Community Living Supports in Independent living/own home		H0043	Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045	Per Diem	5	59	\$6,588	\$1,318	\$112	12
Behavior Management Review		H2000	Encounter	1	1	\$109	\$109	\$109	1
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	39	322	\$7,802	\$200	\$24	8
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	135	88,799	\$223,446	\$1,655	\$3	658
Community Living Supports (15 Minutes)		H2015	15 Minutes	297	123,301	\$437,115	\$1,472	\$4	415
Community Living Supports (Daily)		H2016	Per Diem	10	2,639	\$42,491	\$4,249	\$16	264
Community Living Supports (Daily)		H2016	Per Diem	2	49	\$2,489	\$1,245	\$51	25
Community Living Supports (Daily)		H2016	Per Diem	85	11,225	\$1,428,816	\$16,810	\$127	132
Behavior Services	****	H2019	15 Minutes	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023	15 minutes	5	2,460	\$8,321	\$1,664	\$3	492
Mental Health Therapy		H2027	15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	213	169,096	\$463,383	\$2,176	\$3	794
Medication Review		M0064	Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209	Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215	Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110	15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111	Encounter	2	3	\$405	\$203	\$135	2
Foster Care		S5140	Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145	Days	0	0	\$0	\$0	\$0	0
Respite		S5150	15 Minutes	0	0	\$0	\$0	\$0	0

St. Clair			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	4	37	\$2,604	\$651	\$70	9
Health Services		S9446	Encounter	89	557	\$40,130	\$451	\$72	6
Health Services		S9470	Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	0	0	\$0	\$0	\$0	0
Reidential Room and Board		S9976	Days	0	0	\$0	\$0	\$0	0
Assessment		T1001	Encounter	20	20	\$6,937	\$347	\$347	1
Health Services		T1002	Up to 15 min	202	3,091	\$223,842	\$1,108	\$72	15
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	23	52,106	\$222,887	\$9,691	\$4	2,265
Supports Coordination/Wrap Facilitation		T1016	15 minutes	3	23	\$1,678	\$559	\$73	8
Targeted Case Management		T1017	15 minutes	952	21,069	\$1,156,167	\$1,214	\$55	22
Nursing Home Mental Health Monitoring		T1017	15 minutes	48	1,255	\$68,868	\$1,435	<b>\$</b> 55	26
Personal Care in Licensed Specialized Residential Setting		T1020	Days	91	12,773	\$128,101	\$1,408	\$10	140
Personal Care in Licensed Specialized Residential Setting		T1020	Days	4	566	\$32,375	\$8,094	\$57	142
Personal Care in Licensed Specialized Residential Setting		T1020	Days	2	575	\$55,562	\$27,781	\$97	288
Assessments		T1023	Encounter	352	467	\$217,839	\$619	\$466	1
Enhanced Medical Supplies or Pharmacy		T1999	Items	0	0	\$0	\$0	\$0	0
Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004		0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	163	545	\$113,332	\$695	\$208	3
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	1	12	\$1,499	\$1,499	\$125	12
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)			· · · · · · · · · · · · · · · · · · ·	58	0	\$158,621	\$2,735	\$0	0
Other				25	0	\$14,390	\$576	\$0	0
Total Population and Cost				1,921		\$10,299,168			

MILIST COSt Data by Service Category		riduits with M	iciitai iiiicss		Piscai i ca	1 2004-2003		State of	whenigan
t. Joseph			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		Days	12	1,117	\$501,814	\$41,818	<b>\$44</b> 9	93
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		Days	2	35	\$22,638	\$11,319	\$647	18
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		Days	68	553	\$314,909	\$4,631	\$569	8
Inpatient Hospital Ancillary Services - Room and Board	0144		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		Days	0	0	\$0	\$0	\$0	0
inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320		# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			0	0	\$0	\$0	\$0	0
inpatient Hospital Ancillary Services - Respiratory Services	0410		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450		# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636		# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740		# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762	_	Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901		Encounter	1	1	\$45	\$45	\$45	1
npatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Ser	0911, 0914-0919		# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912		Days	1	1	\$2,181	\$2,181	\$2,181	1
Outpatient Partial Hospitalization	0913		Days	0	0	\$0	\$0	\$0	0
npatient Hospital Ancillary Services - Other Diagnosis Services	0925		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942		# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia  Medication Administration		00104	Minutes	1	7	\$174	\$174	\$25	7
Medication Administration	<del>.</del>	90782	Encounter	30	151	\$2,239	\$75	\$15	5
Assessment-Psychiatric Assessment		90788	Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801	Encounter	323	352	\$92,942	\$288	\$264	1
Therapy-Individual Therapy	. <u></u>	90802	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804	Encounter 20-30 Min	38	53	\$3,016	<b>\$</b> 79	\$57	1
Therapy-Individual Therapy		90805 90806	Encounter 20-30 Min	268	476	\$88,190	\$329	\$185	2
Cherapy-Individual Therapy		90807	Encounter 45-50 Min	330	1,946	\$195,411	\$592	\$100	6
Therapy-Individual Therapy		90807	Encounter 45-50 Min Encounter 75-80 Min	13	0	\$0	\$0	\$0	0
Fherapy-Individual Therapy		90809			36	\$7,163	\$551	\$199	3
Cherapy-Individual Therapy		90809	Encounter 75-80 Min Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Fherapy-Individual Therapy		90810		0	0	\$0	\$0	\$0	0
									0
									I
									0
		20014	Encounter /3-80 IVIII	U	0	\$0	\$0	\$0	0
Therapy-Individual Therapy Therapy-Individual Therapy Therapy-Individual Therapy Therapy-Individual Therapy		90811 90812 90813 90814	Encounter 20-30 Min Encounter 45-50 Min Encounter 45-50 Min Encounter 75-80 Min	0 1 0	0 1 0 0	\$0 \$99 \$0 \$0	\$0 \$99 \$0 \$0		\$0 \$99 \$0 \$0

St. Joseph			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0_
Therapy-Individual Therapy		90816	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817	Encounter 20-30 Min	3	3	\$251	\$84	\$84	1
Therapy-Individual Therapy		90818	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847	Encounter	3	6	\$595	\$198	\$99	2
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853	Encounter	52	599	\$53,754	\$1,034	\$90	12
Therapy-Group Therapy		90857	Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862	Encounter	705	2,474	\$216,908	\$308	\$88	4
Additional Codes-ECT Physician		90870	Encounter	1	1	\$45	\$45	\$45	1
Assessments-Other		90887	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96100	Hour	3	6	\$929	\$310	\$155	2
Assessments-Other		96105	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115	Hour	0	0	\$0	\$0	\$0	0
Assessments-Testing		96117	Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002	Encounter	1	1	\$131	\$131	\$131	1
Occupational Therapy		97003	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	1	2	\$261	\$261	\$131	2
Occupational or Physical Therapy		97532	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703	15 Minutes	0	0	\$0	\$0	\$0	0

St. Joseph			Unit		** *	_	0.40	Com of White	H-3/C
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Occupational Therapy		97750	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services	<u></u>	97802	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803	15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804	30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	,	99205	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238	30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506	Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120		0	0	\$0	\$0	\$0	0
Transportation		A0130		0	0	\$0	\$0	\$0	0
Transportation		A0140		0	0	\$0	\$0	\$0	0
Transportation		A0170		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425	Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427	Refer to Code Descriptions	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428		0	0	\$0	\$0	\$0	0
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Chilibi Cost Data by Bervice Category		Addits with M	Cittat Illinoss		Piscai i Ca	1 2004-2003		State of	wiichigan
St. Joseph			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings		D0274		0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750	· · · · · · · · · · · · · · · · · · ·	0	0	\$0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351	Elicounter	0	0	\$0	\$0	\$0	0
Assessment		H0002	Encounter	4	4	\$250	\$63	\$63	1
Crisis Residential Services		H0018	Days	0	0	\$0	\$0	\$03	0
Prevention Services - Direct Model		H0025	Face to Face Contact	- 0	0	\$0	\$0	\$0	0
Assessment		H0031	Encounter	221	226	\$15,399	\$70	\$68	
Treatment Planning		H0032	Encounter	0	0	\$13,399	\$0	\$0	1 0
Health Services		H0034	15 Minutes	0	0	<b>\$</b> 0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA NA	15 minutes	0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	40	12,234	\$327,453	\$8,186	\$0 \$27	306
Community Living Supports in Independent living/own home		H0043	Per diem	1	19	\$1,064	\$1,064	\$56	
Respite		H0045	Per Diem	0	0	\$1,084	\$1,004	\$0	19
Behavior Management Review		H2000	Encounter	0	0	\$0 \$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	\$0			0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	341			\$0	\$0	0
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	15	2,311	\$175,140	\$514	\$76	7
Community Living Supports (15 Minutes)		H2015	15 Minutes	13	34,825	\$73,588	\$4,906	\$2	2,322
Community Living Supports (Daily)		H2016	Per Diem	2	10,246	\$27,406	\$2,108	\$3	788
Community Living Supports (Daily)		H2016			14	\$463	\$232	\$33	7
Community Living Supports (Daily)		H2016	Per Diem	14	1,765	\$116,706	\$8,336	\$66	126
Behavior Services			Per Diem	54	6,769	\$686,566	\$12,714	\$101	125
Supported Employment Services		H2019	15 Minutes	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2023	15 minutes	11	4,476	\$17,518	\$1,593	\$4	407
Clubhouse Psychosocial Rehabilitation Programs		H2027	15 Minutes	0	0	\$0	\$0	\$0	0_
Medication Review		H2030	15 Minutes	41	73,566	\$274,184	\$6,687	\$4	1,794
Transportation	****	M0064	Encounter Face-to-Face	8	8	\$268	\$34	\$34	1
• • • • • • • • • • • • • • • • • • • •		S0209	Per Mile	0	0	\$0	\$0	\$0	0
Transportation Family Training		S0215	Per Mile	0	0	\$0	\$0	\$0	0
		S5110	15 Minutes	0	0	\$0	\$0	\$0	0
Family Training Foster Care		S5111	Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140	Days	0	0	\$0	\$0	\$0	0
		S5145	Days	0	0	\$0	\$0	\$0	0
Respite		S5150	15 Minutes	0	0	\$0	\$0	\$0	0

CMHSP Cost Data by Service Category

State of Michigan

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St. Joseph			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470	Encounter	1	1	\$65	\$65	\$65	1
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	0	0	\$0	\$0	\$0	0
Reidential Room and Board		S9976	Days	0	0	\$0	\$0	\$0	0
Assessment		T1001	Encounter	9	11	\$633	<b>\$</b> 70	\$58	1
Health Services		T1002	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016	15 minutes	5	107	\$5,393	\$1,079	\$50	21
Targeted Case Management		T1017	15 minutes	155	12,194	\$448,810	\$2,896	\$37	79
Nursing Home Mental Health Monitoring		T1017	15 minutes	2	12	\$437	\$219	\$36	6
Personal Care in Licensed Specialized Residential Setting		T1020	Days	14	311	\$10,282	\$734	\$33	22
Personal Care in Licensed Specialized Residential Setting		T1020	Days	15	1,999	\$132,179	\$8,812	\$66	133
Personal Care in Licensed Specialized Residential Setting		T1020	Days	47	6,351	\$638,958	\$13,595	\$101	135
Assessments		T1023	Encounter	20	25	\$3,440	\$172	\$138	1
Enhanced Medical Supplies or Pharmacy		T1999	Items	0	0	\$0	\$0	\$0	0
Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004		0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	5	6	\$2,073	\$415	\$346	1
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				0	0	\$0	\$0	\$0	0
Other				0	0	\$0	\$0	\$0	0
Total Population and Cost				1,155		\$4,461,970			

State of Michigan

Summit Pointe			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		Days	8	1,132	\$483,407	\$60,426	\$427	142
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		Days	191	1,530	\$947,106	\$4,959	\$619	8
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320		# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450		# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636		# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731	40.40	# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740		# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762		Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901		Encounter	2	30	\$11,246	\$5,623	\$375	15
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919		# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912		Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942		# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104	Minutes	2	433	\$4,459	\$2,230	\$10	217
Medication Administration		90782	Encounter	1	7	\$334	\$334	\$48	7
Medication Administration		90788	Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801	Encounter	625	670	\$126,429	\$202	\$189	1
Assessment-Psychiatric Assessment		90802	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804	Encounter 20-30 Min	203	628	\$62,655	\$309	\$100	3
Therapy-Individual Therapy		90805	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806	Encounter 45-50 Min	1,123	5,285	\$730,277	\$650	\$138	5
Therapy-Individual Therapy		90807	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	,	90808	Encounter 75-80 Min	6	7	\$1,182	\$197	\$169	1
Therapy-Individual Therapy		90809	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

Summit Pointe			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817	Encounter 20-30 Min	0	0	<b>\$</b> 0	\$0	\$0	0
Therapy-Individual Therapy		90818	Encounter 45-50 Min	1	8	\$1,378	\$1,378	\$172	8
Therapy-Individual Therapy		90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	10 110 21122	90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	, , , , , , , , , , , , , , , , , , , ,	90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	1	2	\$278	\$278	\$139	2
Therapy-Family Therapy		90847	Encounter	37	83	\$11,544	\$312	\$139	2
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853	Encounter	383	2,936	\$246,287	\$643	\$84	8
Therapy-Group Therapy		90857	Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862	Encounter	1,250	3,659	\$362,079	\$290	\$99	3
Additional Codes-ECT Physician		90870	Encounter	2	34	\$4,729	\$2,365	\$139	17
Assessments-Other		90887	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96100	Hour	12	22	\$7,511	\$626	\$341	2
Assessments-Other		96105	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115	Hour	0	0	\$0	\$0	\$0	0
Assessments-Testing		96117	Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003	Encounter	3	6	\$331	\$110	\$55	2
Occupational Therapy		97004	Encounter	3	5	\$132	\$44	\$26	2
Occupational or Physical Therapy		97110	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112	15 Minutes	ī	1	\$17	\$17	\$17	1
Occupational or Physical Therapy		97113	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533	15 Minutes	3	5	\$83	\$28	\$17	2
Occupational or Physical Therapy		97535	15 Minutes	2	8	\$132	\$66	\$17	4
Occupational or Physical Therapy		97537	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703	15 Minutes	0	0	\$0	\$0	\$0	0

Transportation

Transportation

Additional Codes-Transportation

Additional Codes-Transportation

Additional codes - Transportation

Per Mile

Refer to Code Descriptions

0

0

0

0

0

0

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0

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\$0

\$0

\$0

\$0

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\$0

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0

A0140

A0170

A0425

A0427

A0428

Summit Pointe			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		3	3	\$187	\$62	\$62	I
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings		D0274		0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110		2	3	\$238	\$119	\$79	2
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		1	1	\$166	\$166	\$166	I
Resin based comp-three surfaces, an		D2332		1	1	\$179	\$179	\$179	1
Resin based comp-one surface, post		D2391	•	0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351		0	0	\$0	\$0	\$0	0
Assessment		H0002	Encounter	721	735	\$136,102	\$189	\$185	1
Crisis Residential Services		H0018	Days	42	205	\$64,845	\$1,544	\$316	5
Prevention Services - Direct Model		H0025	Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032	Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034	15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	80	9,193	\$664,323	\$8,304	\$72	115
Community Living Supports in Independent living/own home		H0043	Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000	Encounter	1	1	\$93	\$93	\$93	1
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	240	1,636	\$130,030	\$542	\$79	7
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	12	24,852	\$89,809	\$7,484	\$4	2,071
Community Living Supports (15 Minutes)	-	H2015	15 Minutes	237	50,111	\$770,525	\$3,251	\$15	211
Community Living Supports (Daily)		H2016	Per Diem	3	723	\$23,067	\$7,689	\$32	241
Community Living Supports (Daily)		H2016	Per Diem	7	1,156	\$75,928	\$10,847	\$66	165
Community Living Supports (Daily)		H2016	Per Diem	22	5,244	\$959,683	\$43,622	\$183	238
Behavior Services		H2019	15 Minutes	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023	15 minutes	182	226,749	\$4,397,999	\$24,165	\$19	1,246
Mental Health Therapy		H2027	15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	0	0	\$0	\$0	\$0	0
Medication Review		M0064	Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209	Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215	Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110	15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		\$5111	Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140	Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145	Days	0	0	\$0	\$0	\$0	0
Respite		S5150	15 Minutes	0	0	\$0	\$0	\$0	0

Summit Pointe	Revenue Code	HCPCS Code	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Service Category	revenue code								
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		\$8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470	Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	0	0	\$0	\$0	\$0	0
Reidential Room and Board		S9976	Days	0	0	\$0	\$0	\$0	0
Assessment		T1001	Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	6	11,369	\$22,315	\$3,719	\$2	1,895
Supports Coordination/Wrap Facilitation		T1016	15 minutes	55	846	\$67,240	\$1,223	\$79	15
Targeted Case Management		T1017	15 minutes	488	16,314	\$895,191	\$1,834	\$55	33
Nursing Home Mental Health Monitoring		T1017	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	Days	23	5,633	\$108,848	\$4,733	\$19	245
Personal Care in Licensed Specialized Residential Setting		T1020	Days	6	985	\$56,647	\$9,441	\$58	164
Personal Care in Licensed Specialized Residential Setting		T1020	Days	3	478	\$46,609	\$15,536	\$98	159
Assessments		T1023	Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999	Items	1	1	\$88	\$88	\$88	1
Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	27	43	\$5,629	\$208	\$131	2
Transportation		T2004	· ·	0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies	-	T2029	Items	1	1	\$78	\$78	\$78	1
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				0	0	\$0	\$0	\$0	0
Other				0	0	\$0	\$0	\$0	0
Total Population and Cost	-		*****	2,981	*	\$11,991,579			

Tuscola	Revenue Code	HCPCS Code	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Service Category		neres code							
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		Days	5	526	\$241,453	\$48,291	\$459	105
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	<b>\$</b> 0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		Days	1	8	\$5,336	\$5,336	\$667	8
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		Days	53	315	\$188,688	\$3,560	\$599	6
Inpatient Hospital Ancillary Services - Room and Board	0144		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Anciliary Services - Laboratory	0300-0302, 0305- 0307		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320		# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450		# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636		# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710		10	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740		# of tests	0	0	<b>\$</b> 0	\$0	\$0	0
Extended Observation Beds	0762		Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901		Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919		# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912		Days	. 0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942		# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104	Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90782	Encounter	31	365	\$22,684	\$732	\$62	12
Medication Administration		90788	Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801	Encounter	277	292	\$96,241	\$347	\$330	1
Assessment-Psychiatric Assessment		90802	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804	Encounter 20-30 Min	50	59	\$2,889	\$58	\$49	1
Therapy-Individual Therapy		90805	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806	Encounter 45-50 Min	394	3,230	\$266,889	\$677	\$83	8
Therapy-Individual Therapy		90807	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808	Encounter 75-80 Min	19	28	\$3,772	\$199	\$135	1
Therapy-Individual Therapy		90809	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy Therapy Individual Therapy		90811	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy Therapy-Individual Therapy		90812	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy  Therapy-Individual Therapy		90813	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Thorapy-thurstidan Therapy		90814	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

State of Michigan

Tuscola			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	'	90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847	Encounter	2	2	\$226	\$113	\$113	1
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853	Encounter	30	348	\$30,917	\$1,031	\$89	12
Therapy-Group Therapy		90857	Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862	Encounter	456	2,165	\$226,710	\$497	\$105	5
Additional Codes-ECT Physician		90870	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96100	Hour	8	40	\$2,720	\$340	\$68	5
Assessments-Other		96105	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115	Hour	0	0	\$0	\$0	\$0	0
Assessments-Testing		96117	Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002	Encounter	0	. 0	\$0	\$0	\$0	0
Occupational Therapy		97003	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113	15 Minutes	0	0	\$0	\$0	\$0	0_
Occupational or Physical Therapy		97116	15 Minutes	0	0	\$0	<b>\$</b> 0	\$0	0
Occupational or Physical Therapy		97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	1	1	\$59	\$59	\$59	1
Occupational or Physical Therapy		97532	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703	15 Minutes	0	0	\$0	\$0	\$0	0

**CMHSP Cost Data by Service Category** 

Tuscola			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Occupational Therapy		97750	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803	15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804	30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214	Encounter	40	53	\$2,142	\$54	\$40	1
Additional Codes-Physician Services		99215	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		27	30	\$2,721	\$101	\$91	1
Additional Codes-Physician Services		99223		1	1	\$0	\$0	\$0	1
Additional Codes-Physician Services		99231		41	240	\$6,845	\$167	\$29	6
Additional Codes-Physician Services		99232		14	31	\$446	\$32	\$14	2
Additional Codes-Physician Services	***	99233		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238	30 Minutes or less	35	38	\$1,735	\$50	\$46	1
Additional Codes-Physician Services		99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251	Encounter	1	1	\$43	\$43	\$43	1
Additional Codes-Physician Services		99252	Encounter	2	2	\$125	\$63	\$63	1
Additional Codes-Physician Services		99253	Encounter	1	1	\$125	\$125	\$125	1
Additional Codes-Physician Services		99254	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	***************************************	99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506	Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080	Per mile	2	2,818	\$988	\$494	\$0	1,409
Transportation		A0090	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120	// w.h	0	0	\$0	\$0	\$0	0
Transportation		A0130		0	0	\$0	\$0	\$0	
Transportation		A0140		0	0	\$0	\$0 \$0	\$0	
Transportation		A0170		0	0	\$0 \$0	\$0	\$0	0
Additional Codes-Transportation		A0425	Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427	Refer to Code Descriptions	0	0	\$0 \$0	\$0	\$0	0
Additional codes - Transportation		A0428	to code pescriptions	0	0	\$0	\$0	\$0	0
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Tuscola			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings		D0274		0	0	<b>\$</b> 0	\$0	\$0	0
Prophylaxis Adult		D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post	•	D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Peridontal, main	*	D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351		0	0	\$0	\$0	\$0	0
Assessment		H0002	Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018	Days	21	98	\$47,590	\$2,266	\$486	5
Prevention Services - Direct Model		H0025	Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031	Encounter	225	248	\$41,187	\$183	\$166	I
Treatment Planning		H0032	Encounter	121	128	\$32,942	\$272	\$257	1
Health Services		H0034	15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	60	5,871	\$418,864	\$6,981	\$71	98
Community Living Supports in Independent living/own home		H0043	Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000	Encounter	1	1	\$63	\$63	\$63	1
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	242	2,300	\$140,050	\$579	\$61	10
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	32	29,639	\$139,647	\$4,364	\$5	926
Community Living Supports (15 Minutes)	11.00	H2015	15 Minutes	1	24,578	\$32,366	\$32,366	\$1	24,578
Community Living Supports (Daily)		H2016	Per Diem	2	122	\$4,838	\$2,419	\$40	61
Community Living Supports (Daily)		H2016	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	Per Diem	26	2,077	\$287,375	\$11,053	\$138	80
Behavior Services	.,	H2019	15 Minutes	0	0	\$0	\$11,055	\$138	0
Supported Employment Services		H2023	15 minutes	38	11,525	\$157,298	\$4,139	\$14	303
Mental Health Therapy		H2027	15 Minutes	0	0	\$137,298	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	0	0	\$0	\$0	\$0	0
Medication Review		M0064	Encounter Face-to-Face	9	9	\$63	\$0 \$7	\$0 \$7	
Transportation		M0064 S0209	Per Mile	0	0	\$63 \$0	\$7 \$0		1
Transportation		S0209 S0215	Per Mile	0	0	· · · · · · · · · · · · · · · · · · ·		\$0	0
Family Training		S0215 S5110	15 Minutes	0	0	\$0 \$0	\$0	\$0	0
Family Training Family Training		S5110 S5111	Encounter	0	0	\$0 \$0	\$0	\$0	0
Foster Care		\$5111 \$5140		0	0	\$0 \$0	\$0	\$0	
Foster Care		\$5140 \$5145	Days	0	0		\$0	\$0	0
Respite			Days		<u> </u>	\$0	\$0	\$0	0
respire		S5150	15 Minutes	0	0	\$0	\$0	\$0	0

Tuscola			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470	Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	1	22	\$263	\$263	\$12	22
Reidential Room and Board		S9976	Days	0	0	\$0	\$0	\$0	0
Assessment		T1001	Encounter	34	36	\$10,196	\$300	\$283	1
Health Services		T1002	Up to 15 min	36	412	\$24,714	\$687	\$60	11
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016	15 minutes	5	136	\$10,453	\$2,091	\$77	27
Targeted Case Management		T1017	15 minutes	252	5,538	\$520,103	\$2,064	\$94	22
Nursing Home Mental Health Monitoring		T1017	15 minutes	32	203	\$13,244	\$414	\$65	6
Personal Care in Licensed Specialized Residential Setting		T1020	Days	2	675	\$5,477	\$2,739	\$8	338
Personal Care in Licensed Specialized Residential Setting		T1020	Days	1	365	\$12,596	\$12,596	\$35	365
Personal Care in Licensed Specialized Residential Setting		T1020	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023	Encounter	102	145	\$35,663	\$350	\$246	I
Enhanced Medical Supplies or Pharmacy		T1999	Items	3	25	\$754	\$251	\$30	8
Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004		0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	0	0	\$51,054	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				59	0	\$7,145	\$121	\$0	0
Other				0	0	\$0	\$0	\$0	0
Total Population and Cost				845		\$3,097,699			

Van Buren			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		Days	9	875	\$411,250	\$45,694	\$470	97
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		Days	61	495	\$300,472	\$4,926	\$607	8
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320		# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370	==.		0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450		# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636		# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EKG/ECG Inpatient Hospital Ancillary Services - EEG	0730-0731		# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0740 0762		# of tests	0	. 0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0762		Hour	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919		Encounter # of visits	0	0	\$3,321 \$0	\$3,321 \$0	\$221 \$0	15
Outpatient Partial Hospitalization	0912		Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913		Days	0	0	\$0	\$0	\$0 \$0	
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925		# of tests	0	0	\$0		\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942		# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104	Minutes	1	56	\$495	\$495	\$9	56
Medication Administration		90782	Encounter	10	19	\$475	\$48	\$25	2
Medication Administration		90788	Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801	Encounter	247	257	\$64,382	\$261	\$251	<del>-</del>
Assessment-Psychiatric Assessment		90802	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804	Encounter 20-30 Min	341	618	\$30,000	\$88	\$49	2
Therapy-Individual Therapy		90805	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806	Encounter 45-50 Min	626	3,621	\$331,707	\$530	\$92	6
Therapy-Individual Therapy		90807	Encounter 45-50 Min	0	0	\$0	\$0	\$0	
Therapy-Individual Therapy		90808	Encounter 75-80 Min	176	368	\$29,903	\$170	\$81	2
Therapy-Individual Therapy		90809	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

Van Buren			Unit		** *		G4/G	C+#1-is	Unit/Case
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	OnioCase
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	5	5	\$500	\$100	\$100	1
Therapy-Family Therapy		90847	Encounter	95	218	\$21,800	\$229	\$100	2
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853	Encounter	114	1,085	\$43,400	\$381	\$40	10
Therapy-Group Therapy		90857	Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862	Encounter	600	2,769	\$172,972	\$288	\$62	5
Additional Codes-ECT Physician		90870	Encounter	1	15	\$1,575	\$1,575	\$105	15
Assessments-Other		90887	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96100	Hour	12	43	\$4,300	\$358	\$100	4
Assessments-Other		96105	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115	Hour	0	0	\$0	\$0	\$0	0
Assessments-Testing		96117	Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003	Encounter	6	7	\$525	\$88	\$75	1
Occupational Therapy		97004	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	7-77	97113	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116	15 Minutes	0	0	\$0	<b>\$</b> 0	\$0	0
Occupational or Physical Therapy		97124	15 Minutes	0	0	\$0	\$0	\$0	
Occupational or Physical Therapy		97140	15 Minutes	0	0	\$0	\$0	\$0	
Occupational or Physical Therapy		97150	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy	<del></del>	97504	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	2	18	\$450	\$225	\$25	9
Occupational or Physical Therapy	11 1000	97532	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533	15 Minutes	0	0	\$0	\$0	\$0	
Occupational or Physical Therapy		97535	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537	15 Minutes	0	0	\$0	\$0	\$0	
Occupational or Physical Therapy		97542	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703	15 Minutes	0	0	\$0	\$0	\$0	- 0
		27,702	15 Minutes			<del></del>		\$0	

Serves (Langer)   Serves (La	Van Buren			Unit						
Despite Marey   1972   19 Muner   0   0   19   19   19   19   10   10	Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
According relatal Service   \$7500   \$1 Minutes   0   0   30   30   30   0   1     According relatal Service   \$7500   \$1 Minutes   0   0   30   30   30   30   30   30	Occupational Therapy		97750	15 Minutes	0	0	\$0	\$0	\$0	0
Manusement Peath Morelas	Occupational Therapy		97755	15 Minutes	0	0	\$0	\$0	\$0	0
Mails   Mail	Assessment or Health Services		97802	15 Minutes	0	0	\$0	\$0	\$0	0
Millerand Code-Physicis Services   95291   Bescuere   0   0   16   30   30   30   30   30   30   30   3	Assessment or Health Services		97803	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Colorie Projection Services         5922         Encounter         0         51         51         50         0           Additional Colorie Projection Services         9203         Encounter         0         0         51         10         30         0         0           Additional Colorie Projection Services         9205         Encounter         0         0         51         10         30         0           Additional Colorie Projection Services         9211         Encounter         0         0         51         10         30         0           Additional Colorie Projection Services         9211         Encounter         0         0         51         0 </td <td>Health Services</td> <td></td> <td>97804</td> <td>30 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Health Services		97804	30 Minutes	0	0	\$0	\$0	\$0	0
Additional Code-Physician Services         5900 Bootsome         0         0         30         30         0           Additional Code-Physician Services         5900 Bootsome         0         0         30         30         0           Additional Code-Physician Services         5921 Bootsome         0         0         30         30         10           Additional Code-Physician Services         5921 Bootsome         0         0         30         30         10         0           Additional Code-Physician Services         5921 Bootsome         0         0         30         30         30         10         0           Additional Code-Physician Services         5921 Bootsome         0         0         30 <td>Additional Codes-Physician Services</td> <td></td> <td>99201</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-Physician Services		99201	Encounter	0	0	\$0	\$0	\$0	0
Additional Colors Physician Services         99244         Denomer         0         9         90         10         10           Additional Colors Physician Services         99211         Denomer         0         0         90         10         10         0           Additional Colors Physician Services         99211         Denomer         0         0         90         10         10         0           Additional Colors Physician Services         99211         Denomer         0         0         90         10         10         10         0           Additional Colors Physician Services         99211         Denomer         0         0         90         10         10         10           Additional Colors Physician Services         99212         Denomer         0         0         90         10         10         10           Additional Colors Physician Services         99212         Denomer         0         0         10	Additional Codes-Physician Services		99202	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes Physician Services   9005   Binoconer   0   0   50   50   50   50   50   50	Additional Codes-Physician Services		99203	Encounter	0	0	\$0	\$0	\$0	0
Additional Code-Physician Services   9921   Binsounier   0   0   30   30   30   0   0   0   0	Additional Codes-Physician Services		99204	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes Physician Services         99212         Beacouster         0         0         50         50         50         0           Additional Codes Physician Services         99214         Beacouster         0         0         30         50         50         0           Additional Codes Physician Services         99215         Neocouster         0         0         50         50         50         0           Additional Codes Physician Services         99221	Additional Codes-Physician Services		99205	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes Physicians Services	Additional Codes-Physician Services		99211	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         9213         Becounter         0         0         50         50         30         30         0           Additional Codes-Physician Services         9921         e         6         6         350         30	Additional Codes-Physician Services		99212	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes Physicials Services         9921         6         0         9         50         50         0           Additional Codes Physicials Services         99221         6         6         5490         370         971         0.1           Additional Codes Physicials Services         99221         4         4         4         370         318         131         1           Additional Codes Physicials Services         99211         8         13,30         510         518         3.3           Additional Codes Physicials Services         99232         9         18         31,30         510         537         22           Additional Codes Physicials Services         99232         30 Minutes or Ires         8         8         5455         557         357         12           Additional Codes Physicials Services         99243         Encounter         0         0         5	Additional Codes-Physician Services		99213	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99221         6         6         5400         570         570         1           Additional Codes-Physician Services         99222         12         12         287         573	Additional Codes-Physician Services		99214	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes Physician Services 99222	Additional Codes-Physician Services		99215	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes Physician Services 99123	Additional Codes-Physician Services		99221		6	6	\$420	\$70	\$70	1
Additional Codes Physician Services 99231 17 88 53.860 5108 538 7 Additional Codes Physician Services 99232 9 18 18 10,00 517 538 7 2 Additional Codes Physician Services 99233 7 11 5500 500 57 2 Additional Codes Physician Services 99234 1 Encounter 0 0 0 50 50 50 50 0 Additional Codes Physician Services 99241 1 Encounter 0 0 0 50 50 50 50 0 Additional Codes Physician Services 99242 1 Encounter 0 0 0 50 50 50 50 0 Additional Codes Physician Services 99242 1 Encounter 0 0 0 50 50 50 50 0 Additional Codes Physician Services 99242 1 Encounter 0 0 0 50 50 50 50 0 Additional Codes Physician Services 99242 1 Encounter 0 0 0 50 50 50 50 50 0 Additional Codes Physician Services 99244 1 Encounter 0 0 0 50 50 50 50 50 0 Additional Codes Physician Services 99244 1 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Additional Codes-Physician Services		99222		12	12	\$875	\$73	\$73	1
Additional Code-Physician Services 9233 9 0 18 1,000 517 558 2 2 4,000 100 100 100 100 100 100 100 100 100	Additional Codes-Physician Services		99223		4	4	\$70	\$18	\$18	1
Additional Code-Physicians Services 9238	Additional Codes-Physician Services		99231		17	58	\$3,360	\$198	\$58	3
Additional Code-Physicians Services         992,8         1 0 Minutes or less         8         8         5,55         57         57         1           Additional Code-Physicians Services         99242         Encounter         0         0         50         50         50         0         0           Additional Code-Physicians Services         99242         Encounter         0         0         50         50         50         0           Additional Code-Physician Services         99244         Encounter         0         0         30         30         50         0           Additional Code-Physician Services         99251         Becounter         0         0         30         30         50         0           Additional Code-Physician Services         99251         Becounter         0         0         30         30         50         0           Additional Code-Physician Services         99252         Becounter         0         0         30         30         50         0           Additional Code-Physician Services         99252         Becounter         0         0         30         50         50         0           Additional Code-Physician Services         99254         Becounter<	Additional Codes-Physician Services		99232		9	18	\$1,050	\$117	\$58	2
Additional Code-Physician Services 9924   Encounter 0 0 0 50 50 50 50 0 0 0 Additional Code-Physician Services 9924   Encounter 0 0 0 50 50 50 50 0 0 0 Additional Code-Physician Services 9924   Encounter 0 0 0 50 50 50 50 0 0 0 Additional Code-Physician Services 9924   Encounter 0 0 0 50 50 50 50 0 0 0 0 0 50 50 50 50	Additional Codes-Physician Services		99233		7	11	\$630	\$90	\$57	2
Additional Codes-Physician Services         99242         Encounter         0         0         \$0	Additional Codes-Physician Services		99238	30 Minutes or less	8	8	\$455	\$57	\$57	1
Additional Codes-Physician Services  99248   Encounter 0 0 0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Additional Codes-Physician Services		99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes Physician Services         99244         Encounter         0         0         50         50         50         0           Additional Codes Physician Services         99251         Encounter         0         0         50         50         50         0           Additional Codes Physician Services         99252         Encounter         0         0         50         50         50         0           Additional Codes Physician Services         99253         Encounter         0         0         50         50         50         0           Additional Codes Physician Services         99254         Encounter         0         0         50         50         50         0           Additional Codes Physician Services         99255         Encounter         0         0         50         50         50         0           Additional Codes Physician Services         99261         Encounter         0         0         50         50         50         0           Additional Codes Physician Services         99263         Encounter         0         0         50         50         50         0           Additional Codes Physician Services         99263         Encounter         0	Additional Codes-Physician Services		99242	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99245         Encounter         0         50         50         50         0           Additional Codes-Physician Services         99251         Encounter         0         0         50         50         50         0           Additional Codes-Physician Services         99252         Encounter         0         0         50         50         50         0           Additional Codes-Physician Services         99254         Encounter         0         0         50         50         50         0           Additional Codes-Physician Services         99255         Encounter         0         0         50         50         50         0           Additional Codes-Physician Services         99261         Encounter         0         0         50 <td>Additional Codes-Physician Services</td> <td></td> <td>99243</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-Physician Services		99243	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99251         Encounter         0         0         50         \$0         50         0           Additional Codes-Physician Services         99252         Encounter         0         0         50         \$0         50         0           Additional Codes-Physician Services         99254         Encounter         0         0         50         \$0         \$0         50         \$0 </td <td>Additional Codes-Physician Services</td> <td></td> <td>99244</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td></td>	Additional Codes-Physician Services		99244	Encounter	0	0	\$0	\$0	\$0	
Additional Codes-Physician Services         99252         Encounter         0         0         80         50         50         0           Additional Codes-Physician Services         99253         Encounter         0         0         50         50         50         0           Additional Codes-Physician Services         99254         Encounter         0         0         50         50         50         0           Additional Codes-Physician Services         99261         Encounter         0         0         50         50         50         0           Additional Codes-Physician Services         99262         Encounter         0         0         50         50         50         0           Additional Codes-Physician Services         99262         Encounter         0         0         50	Additional Codes-Physician Services		99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services   99253   Encounter   0   0   0   50   50   50   50   0	Additional Codes-Physician Services		99251	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services   99254   Encounter   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Additional Codes-Physician Services		99252	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services   99255   Encounter   0   0   0   50   50   50   0   0   Additional Codes-Physician Services   99261   Encounter   0   0   0   50   50   50   0   0   0	Additional Codes-Physician Services		99253	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99261         Encounter         0         0         \$0	Additional Codes-Physician Services		99254	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99262         Encounter         0         0         \$0	Additional Codes-Physician Services		99255	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services   99263   Encounter   0   0   0   50   50   50   0   0   Additional Codes-Physician Services   99271   Encounter   0   0   0   50   50   50   50   0   0	Additional Codes-Physician Services		99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99271         Encounter         0         0         SO         SO         SO         O           Additional Codes-Physician Services         99272         Encounter         0         0         SO         SO         SO         O           Additional Codes-Physician Services         99273         Encounter         0         0         SO         SO         SO         SO         O           Additional Codes-Physician Services         99274         Encounter         0         0         SO         SO         SO         SO         O           Additional Codes-Physician Services         99275         Encounter         0         0         SO         SO <td>Additional Codes-Physician Services</td> <td></td> <td>99262</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-Physician Services		99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99272         Encounter         0         0         \$0	Additional Codes-Physician Services		99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99273         Encounter         0         0         50         \$0	Additional Codes-Physician Services		99271	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99274         Encounter         0         0         50         50         \$0         0           Additional Codes-Physician Services         99275         Encounter         0         0         \$0<	Additional Codes-Physician Services		99272	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99275         Encounter         0         0         \$0	Additional Codes-Physician Services		99273	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration         99506         Encounter         0         0         \$0			99274	Encounter	0	0	\$0	\$0	\$0	0
Transportation         A0080         Per mile         0         0         \$0 </td <td>The second secon</td> <td></td> <td>99275</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	The second secon		99275	Encounter	0	0	\$0	\$0	\$0	0
Transportation         A0090         Per mile         0         0         \$0 </td <td>Medication Administration</td> <td></td> <td>99506</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Medication Administration		99506	Encounter	0	0	\$0	\$0	\$0	0
Transportation         A0100         Per one-way trip         0         0         \$0	Transportation		A0080	Per mile	0	0	\$0	\$0	\$0	0
Transportation         A0110         Per one-way trip         0         0         \$0	Transportation		A0090	Per mile	0	0	\$0	\$0	\$0	0
Transportation         A0120         0         0         \$0	Transportation		A0100	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation         A0130         0         0         \$0	Transportation		A0110	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation         A0140         0         0         \$0	Transportation		A0120		0	0	\$0	\$0	\$0	0
Transportation         A0170         0         0         \$0	···································		A0130		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation         A0425         Per Mile         0         0         \$0			A0140		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation A0427 Refer to Code Descriptions 0 0 \$0 \$0 \$0 \$0 0	Transportation		A0170		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation A0427 Refer to Code Descriptions 0 0 \$0 \$0 \$0 \$0 0	Additional Codes-Transportation		A0425	Per Mile	0	0	\$0	\$0	\$0	0
Additional codes - Transportation A0428 0 0 0 \$0 \$0 \$0 0	Additional Codes-Transportation		A0427	Refer to Code Descriptions	0	0	\$0			
	Additional codes - Transportation		A0428		0	0	\$0	\$0	\$0	0

Van Buren			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220	·	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings		D0274		0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	<b>\$</b> 0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351		0	0	\$0	\$0	\$0	0
Assessment		H0002	Encounter	9	9	\$1,350	\$150	\$150	1
Crisis Residential Services		H0018	Days	3	15	\$3,750	\$1,250	\$250	5
Prevention Services - Direct Model		H0025	Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031	Encounter	559	608	\$91,253	\$163	\$150	1
Treatment Planning		H0032	Encounter	714	932	\$93,179	\$131	\$100	1
Health Services		H0034	15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	93	11,222	\$1,009,980	\$10,860	\$90	121
Community Living Supports in Independent living/own home		H0043	Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review	<del></del>	H2000	Encounter	4	6	\$870	\$218	\$145	2
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	546	2,785	\$69,625	\$128	\$25	5
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	17	28,778	\$230,224	\$13,543	\$8	1,693
Community Living Supports (15 Minutes)		H2015	15 Minutes	63	14,963	\$75,933	\$1,205	\$5	238
Community Living Supports (Daily)		H2016	Per Diem	7	118	\$15,031	\$2,147	\$127	17
Community Living Supports (Daily)		H2016	Per Diem	7	1,058	\$46,258	\$6,608	\$44	151
Community Living Supports (Daily)		H2016	Per Diem	56	7,172	\$1,375,109	\$24,556	\$192	128
Behavior Services		H2019	15 Minutes	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023	15 minutes	31	11,953	\$95,624	\$3,085	\$8	386
Mental Health Therapy		H2027	15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	48	63,053	\$504,424	\$10,509	\$8	1,314
Medication Review		M0064	Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209	Per Mile	0	0	\$0	\$0	\$0	0
Transportation	0-111	S0215	Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110	15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111	Encounter	1	14	\$2,100	\$2,100	\$150	14
Foster Care		S5140	Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145	Days	0	0	\$0	\$0	\$0	0
Respite		S5150	15 Minutes	0	0	\$0	\$0	\$0	0

## CMHSP Cost Data by Service Category Adults with Mental Illness Fiscal Year 2004-2005 State of Michigan

Van Buren			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	37	251	\$12,550	\$339	\$50	7_
Health Services		S9446	Encounter	26	90	\$2,250	\$87	\$25	3
Health Services		S9470	Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program	,	S9484	Hour	0	0	\$0	\$0	\$0	0
Reidential Room and Board		S9976	Days	0	0	\$0	\$0	\$0	0
Assessment		T1001	Encounter	88	103	\$7,725	\$88	\$75	1
Health Services		T1002	Up to 15 min	2	8	\$200	\$100	\$25	4
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016	15 minutes	18	340	\$30,600	\$1,700	\$90	19
Targeted Case Management		T1017	15 minutes	218	9,289	\$836,010	\$3,835	\$90	43
Nursing Home Mental Health Monitoring		T1017	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	Days	16	1,958	\$41,165	\$2,573	\$21	122
Personal Care in Licensed Specialized Residential Setting		T1020	Days	3	993	\$34,244	\$11,415	\$34	331
Personal Care in Licensed Specialized Residential Setting		T1020	Days	42	1,979	\$132,113	\$3,146	\$67	47
Assessments		T1023	Encounter	110	131	\$19,650	\$179	\$150	1
Enhanced Medical Supplies or Pharmacy		T1999	Items	0	0	\$0	\$0	\$0	0
Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004		0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	45	54	\$14,904	\$331	\$276	1
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				45	0	\$11,551	\$257	\$0	0
Other				0	0	\$0	\$0	\$0	0
Total Population and Cost				1,675		\$6,182,059			

Washtenaw			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		Days	30	4,912	\$2,352,652	\$78,422	\$479	164
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154	AA-14-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		Days	8	48	\$9,312	\$1,164	\$194	6
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		Days	498	4,451	\$2,308,556	\$4,636	\$519	9
Inpatient Hospital Ancillary Services - Room and Board	0144		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320		# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444		# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450		# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636		# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740		# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762		Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901		Encounter	3	17	\$13,600	\$4,533	\$800	6
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919		# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912		Days	16	140	\$27,920	\$1,745	\$199	9
Outpatient Partial Hospitalization	0913		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942		# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104	Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90782	Encounter	356	3,231	\$158,028	\$444	\$49	9
Medication Administration		90788	Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment Assessment-Psychiatric Assessment		90801	Encounter	829	1,219	\$340,674	\$411	\$279	1
			Encounter	1 70		\$419	\$419	\$419	1
Therapy-Individual Therapy		90804	Encounter 20-30 Min	53	146	\$15,301	\$289	\$105	3
Therapy-Individual Therapy Therapy-Individual Therapy		90805	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy  Therapy-Individual Therapy		90806	Encounter 45-50 Min	205	2,135	\$371,993	\$1,815	\$174	10
Therapy-Individual Therapy Therapy-Individual Therapy		90807	Encounter 45-50 Min Encounter 75-80 Min	9	13	\$0	\$0	\$0 \$245	0
Therapy-Individual Therapy  Therapy-Individual Therapy		90808	Encounter 75-80 Min Encounter 75-80 Min	0	0	\$3,179 \$0	\$353 \$0	\$245 \$0	1 0
Therapy-Individual Therapy  Therapy-Individual Therapy		90809	Encounter 75-80 Min Encounter 20-30 Min	0	0	\$0	\$0 	\$0 \$0	0
Therapy-Individual Therapy  Therapy-Individual Therapy		90810	Encounter 20-30 Min Encounter 20-30 Min	0	0		· · · · · · · · · · · · · · · · · · ·		0
Therapy-Individual Therapy  Therapy-Individual Therapy		90811	Encounter 20-30 Min Encounter 45-50 Min	15	54	\$11,319	\$0 \$755	\$0	4
Therapy-Individual Therapy  Therapy-Individual Therapy		90812	Encounter 45-50 Min	0	0	\$11,319	\$755 \$0	\$210 \$0	
Therapy-Individual Therapy  Therapy-Individual Therapy		90814	Encounter 75-80 Min	0	0	\$0	\$0	\$0 \$0	0
Thomps Therrough Therapy		70014	FUICORITE 12-90 MILL	U	U	<b>3</b> 0	30	20	

Washtenaw			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	1 10 100 100 100 100 100 100 100 100 10	90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	-	90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	1	1	\$154	\$154	\$154	1
Therapy-Family Therapy		90847	Encounter	18	127	\$26,620	\$1,479	\$210	7
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853	Encounter	234	4,078	\$284,930	\$1,218	\$70	17
Therapy-Group Therapy		90857	Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862	Encounter	1,468	7,407	\$828,029	\$564	\$112	5
Additional Codes-ECT Physician		90870	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96100	Hour	10	29	\$6,079	\$608	\$210	3
Assessments-Other		96105	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111	Encounter	1	2	\$1,747	\$1,747	\$873	2
Assessments-Testing		96115	Hour	0	0	\$0	\$0	\$0	0
Assessments-Testing		96117	Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003	Encounter	52	65	\$14,533	\$279	\$224	1
Occupational Therapy		97004	Encounter	22	65	\$10,899	\$495	\$168	3
Occupational or Physical Therapy		97110	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150	Encounter	0		\$0	\$0	\$0	- 0
Occupational Therapy		97504	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	0	0	\$0	\$0	\$0	
Occupational or Physical Therapy		97532	15 Minutes	0	0		\$0	\$0	0
Occupational or Physical Therapy		97533	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537	15 Minutes	0	0	\$0	\$0	\$0	
Occupational or Physical Therapy		97542	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703	15 Minutes	0	0	\$0	\$0	\$0	0
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Serves (Despose Professor   1972   19 Kinders   19   19   19   19   19   19   19   1	Washtenaw			Unit						
	Service Category	Revenue Code	HCPCS Code	Measure	Cases					
Personner of Febril Services   7970   1   5 Mones   1   1   50   50   52   52   50   70   1   5 Mones   2   5 Mones   2   5   5 Mones   3   5   5   5   5   5   5   5   5   5	Occupational Therapy			15 Minutes						
Materian Profess   9700   9 Miners   4   10   9,250   10   9   10   10   10   10   10   10	Occupational Therapy		97755	15 Minutes	0	0				0
Mach Novikier   17988   31 Minutes   0   0   50   50   51   0   0   1   0   0   1   0   0   0	Assessment or Health Services		97802	15 Minutes	1	<u> </u>				
Michael Code-Physicis Service   99291   Broccoser   0   0   50   50   50   0   0   50   50   0	Assessment or Health Services		97803	15 Minutes	4					
	Health Services		97804	30 Minutes						
Michigan Colors Projectics Services   1920   1900   190	Additional Codes-Physician Services		99201	Encounter					· · · · ·	
Meditamic Code - Physician Services   9204   Encourse   0   0   10   10   10   10   10   10	Additional Codes-Physician Services			Encounter						
Michican Code Physician Services   9201   Emounter   0   0   50   50   50   50   50   50	Additional Codes-Physician Services		99203	Encounter	0	0				
Meditional Codes Physician Services   921.1   Binometer   0   0   10   10   10   10   10   10	Additional Codes-Physician Services			Encounter						
Additional Codes Physician Services   99212   Encounter   0   0   0   50   50   50   50   50	Additional Codes-Physician Services			Encounter	0		**			
Additional Code-Physicials Services         99214         Decounter         0         0         30         30         50         0           Additional Codes-Physicials Services         99215         Decounter         0         0         30         10         30         0           Additional Codes-Physicials Services         99221         0         0         0         30         50         30         0           Additional Codes-Physicials Services         99223         0         0         0         30         50         30         0           Additional Codes-Physicials Services         99231         0         0         0         30         50         30         0           Additional Codes-Physicials Services         99232         0         0         0         30         50         30	Additional Codes-Physician Services									
Multiment Codes Physician Services   99214   Broowner   0   0   50   50   50   50   0   0   10   1	Additional Codes-Physician Services		99212	Encounter						
Additional Codes Physician Services   99121   0 0 0 50 50 50 50 0 0 0 0 0 0 50 50 50	Additional Codes-Physician Services			Encounter						
Additional Codes Physician Services   99231   0 0 0 50 50 50 50 50 0 0 0 0 0 50 50 50	Additional Codes-Physician Services			Encounter	0					
Additional Codes Physician Services 99231 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Additional Codes-Physician Services		99215	Encounter	0	0				0
Additional Code-Physician Services         992.21         0         0         50         50         50         0           Additional Code-Physician Services         992.31         0         0         50         50         50         0           Additional Code-Physician Services         992.33         30 Manus or less         0         0         50         50         50         0           Additional Code-Physician Services         992.38         30 Manus or less         0         0         50         50         50         0           Additional Code-Physician Services         992.41         Browner         0         0         50         50         50         0         0           Additional Code-Physician Services         992.42         Browner         0         0         50         50         50         0         0           Additional Code-Physician Services         992.42         Browner         0         0         50         50         50         0         0           Additional Code-Physician Services         992.51         Browner         0         0         50         50         50         0         0           Additional Code-Physician Services         992.51         Browner	Additional Codes-Physician Services		99221		0				<del></del>	
Additional Code-Physician Services         99211         0         0         90	Additional Codes-Physician Services		99222		0	0		\$0	\$0	0
Additional Code-Physician Services 9223	Additional Codes-Physician Services		99223		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services 99235	Additional Codes-Physician Services		99231		0	0	\$0	\$0	\$0	0
Additional Code-Physicians Services         99218         3 0 Minutes or less         0         50         50         50         50         0           Additional Code-Physician Services         9924         Encounter         0         0         50         50         50         0           Additional Code-Physician Services         99243         Encounter         0         0         50         50         50         0           Additional Code-Physician Services         99244         Encounter         0         0         50         50         50         0           Additional Code-Physician Services         99245         Encounter         0         0         50         50         50         0           Additional Code-Physician Services         99245         Encounter         0         0         50         50         50         50         50         50         60           Additional Code-Physician Services         99245         Encounter         0         0         50         50         50         50         60           Additional Code-Physician Services         99253         Encounter         0         0         50         50         50         60           Additional Code-Physician	Additional Codes-Physician Services		99232		0	0	\$0	\$0	\$0	0
Additional Codes Physician Services         99241         Encounter         0         0         50         50         50         0           Additional Codes Physician Services         99242         Encounter         0         0         30         30         30         0           Additional Codes Physician Services         99244         Encounter         0         0         30         30         30         0           Additional Codes Physician Services         99245         Encounter         0         0         30         30         30         0           Additional Codes Physician Services         99251         Encounter         0         0         30         30         30         0           Additional Codes Physician Services         99252         Encounter         0         0         30         30         30         0           Additional Codes Physician Services         99253         Encounter         0         0         50         50         50         50         0           Additional Codes Physician Services         99253         Encounter         0         0         50         50         50         0         0           Additional Codes Physician Services         99255	Additional Codes-Physician Services		99233		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99242         Encounter         0         0         \$0	Additional Codes-Physician Services		99238	30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services   99243   Encounter   0   0   50   50   50   50   0	Additional Codes-Physician Services		99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services   99244   Encounter   0   0   50   50   50   50   0	Additional Codes-Physician Services		99242	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services   99255   Encounter   0   0   50   50   50   50   50   50	Additional Codes-Physician Services		99243	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services   99251   Encounter   0   0   50   50   50   50   50   50	Additional Codes-Physician Services		99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services   99252   Encounter   0   0   0   50   50   50   50   50	Additional Codes-Physician Services		99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99253         Encounter         0         0         \$0	Additional Codes-Physician Services		99251	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99254         Encounter         0         0         \$0	Additional Codes-Physician Services		99252	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99255         Encounter         0         0         \$0	Additional Codes-Physician Services		99253	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99261         Encounter         0         0         \$0	Additional Codes-Physician Services		99254	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99262         Encounter         0         0         \$0	Additional Codes-Physician Services		99255	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99263         Encounter         0         0         \$0	Additional Codes-Physician Services		99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99271         Encounter         0         0         \$0	Additional Codes-Physician Services		99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99272         Encounter         0         0         \$0	Additional Codes-Physician Services		99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99273         Encounter         0         0         50         50         50         0           Additional Codes-Physician Services         99274         Encounter         0         0         50         50         50         0           Additional Codes-Physician Services         99275         Encounter         0         0         50         50         50         0           Additional Codes-Physician Services         99275         Encounter         0         0         50         50         50         0           Additional Codes-Physician Services         99275         Encounter         0         0         50         50         50         0           Additional Codes-Physician Services         99275         Encounter         0         0         50         50         50         0         0         0         50         50         50         0         0         0         50         50         50         0         0         0         50         50         50         0         0         0         50         50         50         0         0         0         50         50         50         0         0         0 <td></td> <td></td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>				Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99274         Encounter         0         0         \$0				Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99275         Encounter         0         0         \$0	· · · · · · · · · · · · · · · · · · ·		99273	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration         99506         Encounter         5         11         \$999         \$200         \$91         2           Transportation         A0080         Per mile         0         0         \$0			99274	Encounter	0	0	\$0	\$0	\$0	0
Transportation         A0080         Per mile         0         0         \$0 </td <td></td> <td></td> <td>99275</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>			99275	Encounter	0	0	\$0	\$0	\$0	0
Transportation         A0090         Per mile         0         0         \$0 </td <td></td> <td></td> <td>99506</td> <td>Encounter</td> <td>5</td> <td>11</td> <td>\$999</td> <td>\$200</td> <td>\$91</td> <td>2</td>			99506	Encounter	5	11	\$999	\$200	\$91	2
Transportation         A0100         Per one-way trip         0         0         \$0			A0080	Per mile	0	0	\$0	\$0	\$0	0
Transportation         A0110         Per one-way trip         0         0         \$0			A0090	Per mile	0	. 0	\$0	\$0	\$0	0
Transportation         A0120         0         0         50         \$0			A0100	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation         A0130         0         0         \$0	•			Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation         A0140         0         0         \$0					0	0	\$0	\$0	\$0	0
Transportation         A0170         0         0         50         \$0			A0130		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation         A0425         Per Mile         0         0         \$0	•		A0140		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation         A0427         Refer to Code Descriptions         0         0         \$0         \$0         \$0         \$0         \$0	·		A0170		0	0	\$0	\$0	\$0	0
The contract of the contract o	The state of the s			Per Mile	0	0	\$0	\$0	\$0	0
Additional codes - Transportation A0428 0 0 0 \$0 \$0 \$0 0			A0427	Refer to Code Descriptions	0	0	\$0	\$0	\$0	
	Additional codes - Transportation		A0428		0	0	\$0	\$0	\$0	0

Washtenaw			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	. \$0	\$0	\$0	0
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings		D0274		0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth	,	D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920	1 1 11 11 11 11 11 11 11 11 11 11 11 11	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351		0	0	\$0	\$0	\$0	0
Assessment		H0002	Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018	Days	125	1,770	\$328,778	\$2,630	\$186	14
Prevention Services - Direct Model		H0025	Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032	Encounter	458	556	\$77,695	\$170	\$140	1
Health Services		H0034	15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	175	22,757	\$1,979,404	\$11,311	\$87	130
Community Living Supports in Independent living/own home		H0043	Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000	Encounter	18	57	\$11,948	\$664	\$210	3
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	163	1,584	\$87,880	\$539	\$55	10
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	2	780	\$5,452	\$2,726	\$7	390
Community Living Supports (15 Minutes)		H2015	15 Minutes	84	157,754	\$544,251	\$6,479	\$3	1,878
Community Living Supports (Daily)		H2016	Per Diem	70	21,087	\$321,366	\$4,591	\$15	301
Community Living Supports (Daily)		H2016	Per Diem	22	4,052	\$213,581	\$9,708	\$53	184
Community Living Supports (Daily)		H2016	Per Diem	45	12,078	\$1,240,531	\$27,567	\$103	268
Behavior Services		H2019	15 Minutes	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023	15 minutes	60	95,069	\$921,169	\$15,353	\$10	1,584
Mental Health Therapy	* ***	H2027	15 Minutes	- 0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	44	20,124	\$273,284	\$6,211	\$14	457
Medication Review		M0064	Encounter Face-to-Face	- 0	0	\$0	\$0	\$0	0
Transportation		S0209	Per Mile	0	0	\$0	\$0	\$0	- 0
Transportation		S0215	Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110	15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111	Encounter	107	818	\$171,461	\$1,602	\$210	8
Foster Care		S5140	Days	0	0	\$171,401	\$1,002	\$210	
Foster Care		S5145	Days	0	0	\$0	\$0	\$0	0
Respite	***	S5150	15 Minutes	1	304	\$2,125	\$2,125	\$0 \$7	304
		22130	15 11414463	1	304	\$2,123	\$2,123	<b>3</b> /	304

Washtenaw			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470	Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	0	0	\$0	\$0	\$0	0
Reidential Room and Board		S9976	Days	0	0	\$0	\$0	\$0	0
Assessment		T1001	Encounter	207	381	\$79,861	\$386	\$210	2
Health Services		T1002	Up to 15 min	347	5,634	\$275,559	\$794	\$49	16
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	2	13,152	\$24,068	\$12,034	\$2	6,576
Supports Coordination/Wrap Facilitation		T1016	15 minutes	50	1,132	\$161,480	\$3,230	\$143	23
Targeted Case Management		T1017	15 minutes	1,236	27,053	\$4,163,998	\$3,369	\$154	22
Nursing Home Mental Health Monitoring		T1017	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	Days	47	10,559	\$198,509	\$4,224	\$19	225
Personal Care in Licensed Specialized Residential Setting		T1020	Days	11	1,904	\$103,197	\$9,382	\$54	173
Personal Care in Licensed Specialized Residential Setting		T1020	Days	3	818	\$91,706	\$30,569	\$112	273
Assessments		T1023	Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999	Items	0	0	\$0	\$0	\$0	0
Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation	***	T2004	18 1 1150	0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	3	15	\$3,843	\$1,281	\$256	5
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				508	0	\$385,163	\$758	\$0	0
Other				0	0	\$0	\$0	\$0	0
Total Population and Cost				2,000		\$18,458,576			

Encounter 75-80 Min

Encounter 75-80 Min

Encounter 20-30 Min

Encounter 20-30 Min

Encounter 45-50 Min

Encounter 45-50 Min

Encounter 75-80 Min

90808

90809

90810

90811

90812

90813

90814

Therapy-Individual Therapy

22

0

0

0

0

0

37

0

0

0

0

0

0

\$9,705

\$0

\$0

\$0

\$0

\$0

\$0

\$441

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\$0

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\$0

\$262

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West Michigan			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90815	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	Encounter 20-30 Min	0	0	<b>\$</b> 0	\$0	\$0	0
Therapy-Individual Therapy		90826	Encounter 45-50 Min	0	0	<b>\$</b> 0	\$0	\$0	0
Therapy-Individual Therapy		90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847	Encounter	3	6	\$936	\$312	\$156	2
Therapy-Family Therapy	•	90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853	Encounter	90	365	\$28,324	\$315	\$78	4
Therapy-Group Therapy		90857	Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862	Encounter	663	3,582	\$479,128	\$723	\$134	5
Additional Codes-ECT Physician		90870	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887	Encounter	4	4 -	\$654	\$164	\$164	ī
Speech & Language Therapy		92506	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507	Encounter	1	7	\$1,033	\$1,033	\$148	7
Speech & Language Therapy		92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96100	Hour	16	78	\$11,031	\$689	\$141	5
Assessments-Other		96105	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115	Hour	0	0	\$0	\$0	\$0	0
Assessments-Testing		96117	Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003	Encounter	1	1	\$231	\$231	\$231	1
Occupational Therapy		97004	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110	15 Minutes	1	16	\$513	\$513	\$32	16
Occupational or Physical Therapy		97112	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116	15 Minutes	0	0	<b>\$</b> 0	\$0	\$0	0
Occupational or Physical Therapy		97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy	=	97504	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530	15 Minutes	1	12	\$586	\$586	\$49	12
Occupational or Physical Therapy		97532	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703	15 Minutes	0	0	\$0	\$0	\$0	0
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Additional Codes-Physician Services	99203	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99204	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99205	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99211	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99212	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99213	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99214	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99215	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99221		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99222		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99223		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99231		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99232	***	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99233		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99238	30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99242	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99243	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99251	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99252	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99253	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99254	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99255	Encounter	0	0	<b>\$</b> 0	\$0	\$0	0
Additional Codes-Physician Services	99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99271	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99272	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99273	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99274	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99275	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration	99506	Encounter	0	0	<b>\$</b> 0	\$0	\$0	0
Transportation	A0080	Per mile	2	2	\$1,816	\$908	\$908	1
Transportation	A0090	Per mile	0	0	<b>\$</b> 0	\$0	\$0	0
Transportation	A0100	Per one-way trip	0	0	<b>\$</b> 0	\$0	\$0	0
Transportation	A0110	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation	A0120		0	0	\$0	\$0	\$0	0
Transportation	A0130		0	0	\$0	\$0	\$0	0
Transportation	A0140		0	0	\$0	\$0	\$0	0
Transportation	A0170		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation	A0425	Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation	A0427	Refer to Code Descriptions	0	0	\$0	\$0	\$0	0
Additional codes - Transportation	A0428		0	0	\$0	\$0	\$0	0

West Michigan			Unit		** **	_	0.40	C/KI-b	U-3/C
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings		D0274		0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0 _	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351		26	185	\$9,816	\$378	\$53	7
Assessment		H0002	Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018	Days	12	67	\$20,039	\$1,670	\$299	6
Prevention Services - Direct Model		H0025	Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031	Encounter	533	668	\$165,945	\$311	\$248	1
Treatment Planning		H0032	Encounter	268	318	\$66,920	\$250	\$210	1
Health Services		H0034	15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	75	18,779	\$740,644	\$9,875	\$39	250
Community Living Supports in Independent living/own home		H0043	Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000	Encounter	7	21	\$2,153	\$308	\$103	3
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	420	3,091	\$118,200	\$281	\$38	7
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	6	460	\$4,122	\$687	\$9	77
Community Living Supports (15 Minutes)		H2015	15 Minutes	22	2,645	\$22,773	\$1,035	\$9	120
Community Living Supports (Daily)		H2016	Per Diem	2	360	\$12,373	\$6,187	\$34	180
Community Living Supports (Daily)		H2016	Per Diem	1	82	\$3,725	\$3,725	\$45	82
Community Living Supports (Daily)		H2016	Per Diem	13	3,001	\$311,144	\$23,934	\$104	231
Behavior Services		H2019	15 Minutes	0	0	\$0	\$0	\$104	0
Supported Employment Services		H2023	15 minutes	32	3,846	\$22,076	\$690	\$6	120
Mental Health Therapy		H2027	15 Minutes	0	0	\$22,070	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes		0	\$0	\$0 \$0	\$0 \$0	
Medication Review	,	M0064	Encounter Face-to-Face	0	0	\$0 \$0	\$0	\$0 \$0	
Transportation		S0209	Per Mile	0	0	\$0	\$0	\$0 \$0	
Transportation		S0215	Per Mile	0	0	\$0	\$0	\$0 \$0	0
Family Training		S5110	15 Minutes	0	0	\$0	\$0 \$0		
Family Training		S5111	Encounter	35	471	\$81,841		\$0	- 0
Foster Care		S5140	Days	0	0		\$2,338	\$174	13
Foster Care	*** F** / 18-14-18-	S5145	Days	0	0	\$0	\$0	\$0	- 0
Respite		S5150	15 Minutes	2		\$0	\$0	\$0	0
		33130	13 Minutes		468	\$421	\$211	\$1	234

## CMHSP Cost Data by Service Category Adults with Mental Illness Fiscal Year 2004-2005 State of Michigan

West Michigan			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite		S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	. 0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470	Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	0	0	\$0	\$0	\$0	0
Reidential Room and Board		S9976	Days	0	0	\$0	\$0	\$0	0
Assessment		T1001	Encounter	1	1	\$150	\$150	\$150	1
Health Services		T1002	Up to 15 min	4	20	\$1,061	\$265	\$53	5
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016	15 minutes	0	0	\$0	\$0	\$0	0
Targeted Case Management		T1017	15 minutes	591	23,978	\$1,201,538	\$2,033	\$50	41
Nursing Home Mental Health Monitoring		T1017	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	Days	6	1,628	\$52,763	\$8,794	\$32	271
Personal Care in Licensed Specialized Residential Setting	11.10	T1020	Days	10	1,732	\$120,080	\$12,008	\$69	173
Personal Care in Licensed Specialized Residential Setting		T1020	Days	2	83	\$8,830	\$4,415	\$106	42
Assessments		T1023	Encounter	127	139	\$34,530	\$272	\$248	1
Enhanced Medical Supplies or Pharmacy		T1999	Items	0	0	\$0	\$0	\$0	0
Transportation		T2001		0	0	\$0	\$0	\$0	0
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	6	371	\$1,862	\$310	\$5	62
Transportation		T2004		0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	. 0
PASRR Level II Screens		T2011	Evaluation	55	55	\$65,179	\$1,185	\$1,185	1
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	10	23	\$9,212	\$921	\$401	2
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)	·			0	0	\$0	\$0	\$0	0
Other				11	0	\$1,730	\$157	\$0	0
Total Population and Cost				1,502		\$4,844,827			

Therapy-Individual Therapy

Therapy-Individual Therapy

Therapy-Individual Therapy

Therapy-Individual Therapy

Encounter 20-30 Min

Encounter 45-50 Min

Encounter 45-50 Min

Encounter 75-80 Min

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I nerapy-Individual I nerapy	90818	Encounter 45-50 Min	U	U	<b>⊅</b> ∪	3·0	<b>3</b> ∪	U
Therapy-Individual Therapy	90819	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	90821	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	90822	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	90823	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	90824	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	90826	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	90827	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	90828	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	90829	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	90846	Encounter	21	34	\$4,386	\$209	\$129	2
Therapy-Family Therapy	90847	Encounter	54	133	\$17,157	\$318	\$129	2
Therapy-Family Therapy	90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	90849	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy	90853	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy	90857	Encounter	0	0	\$0	\$0	\$0	0
Medication Review	90862	Encounter	331	1,080	\$85,320	\$258	\$79	3
Additional Codes-ECT Physician	90870	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other	90887	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	92506	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	92507	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	92508	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	92526	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	92610	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing	96100	Hour	1	1	\$645	\$645	\$645	1
Assessments-Other	96105	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other	96110	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other	96111	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing	96115	Hour	0	0	\$0	\$0	\$0	0
Assessments-Testing	96117	Hour	0	0	\$0	\$0	\$0	0
Physical Therapy	97001	Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy	97002	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy	97003	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy	97004	Encounter	0	0	\$0	\$0	\$0	
Occupational or Physical Therapy	97110	15 Minutes	0	0	\$0	\$0	\$0	
Occupational or Physical Therapy	97112	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97113	15 Minutes	0	0	\$0 \$0	\$0	\$0	0
Occupational or Physical Therapy	97116	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97116	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97140		0	0	\$0			
Occupational or Physical Therapy Occupational Therapy	97150 97504	Encounter	0	0		\$0	\$0	0
Occupational or Physical Therapy	97504	15 Minutes	0		\$0	\$0	\$0	0
Occupational or Physical Therapy Occupational or Physical Therapy	97532	15 Minutes		0	\$0	\$0	\$0	0
Occupational or Physical Therapy Occupational or Physical Therapy	7-7-1-1-1	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy Occupational or Physical Therapy	97533 97535	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy Occupational or Physical Therapy	97537	15 Minutes	0	0	\$0 \$0	\$0	\$0	0
Occupational or Physical Therapy Occupational or Physical Therapy	97537 97542	15 Minutes	0	0	·	\$0	\$0	0
Occupational Therapy	97542 97703	15 Minutes	0	0	\$0 \$0	\$0	\$0	0
оссиранова тистару	97703	15 Minutes	U	U	30	\$0	\$0	0

Woodlands			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Occupational Therapy		97750	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803	15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804	30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238	30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	•	99242	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	***	99272	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275	Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506	Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090	Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120		0	0	\$0	\$0	\$0	
Transportation		A0130		0	0	\$0	\$0	\$0	
Transportation		A0140		0	0	\$0	\$0	\$0	
Transportation		A0170		0	0	\$0	\$0	\$0	
Additional Codes-Transportation		A0425	Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427	Refer to Code Descriptions	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428	2010. to Code Descriptions	0	0	\$0	\$0	\$0	0
		710-720					. <b>⊅</b> ∨	<b>J</b> ∪	U

Woodlands			Unit						** * * * * * * * * * * * * * * * * * * *
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
General dental services		D0150		0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		0	0	\$0	\$0	\$0	0
Bitewings		D0274		0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750		0	0	\$0	\$0	\$0	0
Peridontal, main		D4910		0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177	Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351		0	0	\$0	\$0	\$0	0
Assessment		H0002	Encounter	266	270	\$34,830	\$131	\$129	1
Crisis Residential Services		H0018	Days	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025	Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031	Encounter	14	25	\$10,353	\$740	\$414	2
Treatment Planning		H0032	Encounter	129	131	\$16,899	\$131	\$129	1
Health Services		H0034	15 Minutes	280	411	\$18,060	\$65	\$44	1
Community Psychiatric Supportive Treatment		H0037	Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	15 minutes	5	309	\$2,163	\$433	\$7	62
Peer Directed and Operated Support Services		NA		0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043	Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010	15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011	15 Minutes	125	721	\$42,900	\$343	\$60	6
Skill-Building and Out of Home Non Vocational Habilitation		H2014	15 minutes	11	3,434	\$19,753	\$1,796	\$6	312
Community Living Supports (15 Minutes)		H2015	15 Minutes	90	219,798	\$1,044,041	\$11,600	\$5	2,442
Community Living Supports (Daily)		H2016	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	Per Diem	2	730	\$110,444	\$55,222	\$151	365
Behavior Services		H2019	15 Minutes	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023	15 minutes	45	2,525	\$78,275	\$1,739	\$31	56
Mental Health Therapy		H2027	15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030	15 Minutes	41	32,545	\$105,771	\$2,580	\$3	794
Medication Review		M0064	Encounter Face-to-Face	8	8	\$632	\$79	\$79	1
Transportation		S0209	Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215	Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110	15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111	Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140	Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145	Days	0	0	\$0	\$0	\$0	0
Respite		S5150	15 Minutes	0	0	\$0	\$0	\$0	0

Woodlands			Unit						
Service Category	Revenue Code	HCPCS Code	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite	-	S5151	Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161	Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165	Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199	Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470	Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484	Hour	0	0	\$0	\$0	\$0	0
Reidential Room and Board		S9976	Days	0	0	\$0	\$0	\$0	0
Assessment		T1001	Encounter	59	83	\$10,707	\$181	\$129	1
Health Services		T1002	Up to 15 min	6	17	\$548	\$91	\$32	3
Health Services		T1003	Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005	15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016	15 minutes	0	0	\$0	\$0	\$0	0
Targeted Case Management		T1017	15 minutes	218	13,237	\$787,602	\$3,613	\$60	61
Nursing Home Mental Health Monitoring		T1017	15 minutes	3	30	\$1,785	\$595	\$60	10
Personal Care in Licensed Specialized Residential Setting		T1020	Days	1	365	\$13,011	\$13,011	\$36	365
Personal Care in Licensed Specialized Residential Setting		T1020	Days	1	365	\$18,516	\$18,516	\$51	365
Personal Care in Licensed Specialized Residential Setting		T1020	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023	Encounter	59	64	\$9,823	\$166	\$153	1
Enhanced Medical Supplies or Pharmacy		T1999	Items	0	0	\$0	\$0	\$0	0
Transportation		T2001		19	18	\$8,074	\$425	\$449	1
Transportation		T2002	Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003	Encounter / Trip	2	2	\$1,025	\$513	\$513	1
Transportation		T2004		0	0	\$0	\$0	\$0	0
Transportation		T2005		0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011	Evaluation	53	53	\$5,597	\$106	\$106	1
Enhanced Medical Equipment-Supplies		T2028	Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036	Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038	Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039	Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				0	0	\$0	\$0	\$0	0
Other				0	0	\$0	\$0	\$0	0
Total Population and Cost				673		\$3,484,876			